

MI7000007103

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

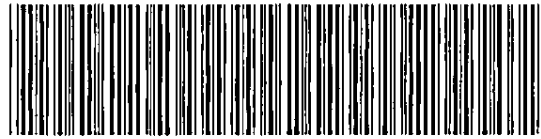
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



800338810488

20 JAN -7 PM 1:55

FILED

2020 JAN -7 AM 8:56

SECRET  
FALL 2019

RECEIVED

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 124539 47726A

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE : January 7, 2020

ORDER TIME : 12:43 PM

ORDER NO. : 124539-005

CUSTOMER NO: 47726A

FOREIGN FILINGS

NAME: NORTH MARY BRICKELL LLC

☐ CORPORATE  
☐ LIMITED PARTNERSHIP  
☒ LIMITED LIABILITY COMPANY

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY  
☒ PLAIN STAMPED COPY  
☐ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Kadesha Roberson -- EXT# 62969

EXAMINER: \_\_\_\_\_



# RESUBMIT

Please give original  
submission date as file date.

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 8, 2020

CORPORATION SERVICE COMPANY

SUBJECT: NORTH MARY BRICKELL LLC  
Ref. Number: M17000007103

RECEIVED  
2020 JAN -8 PM 4:02  
CORPORATION SERVICE COMPANY

We have received your document for NORTH MARY BRICKELL LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Yasemin Y Sulker  
Regulatory Specialist III

Letter Number: 220A00000428

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** North Mary Brickell LLC

\_\_\_\_\_  
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Lindsey Nielson

\_\_\_\_\_  
Name of Person

The Cheesecake Factory Incorporated

\_\_\_\_\_  
Firm/Company

26901 Malibu Hills Rd.

\_\_\_\_\_  
Address

Calabasas, CA 91301

\_\_\_\_\_  
City/State and Zip Code

lnielson@thecheesecakefactory.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lindsey Nielson

at ( 818 ) 871-3000 ext 4950

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code & Daytime Telephone Number

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**Enclosed is a check for the following amount:**

☒ \$25 Filing Fee    ☐ \$30 Filing Fee & Certificate of Status    ☐ \$55 Filing Fee & Certified Copy    ☐ \$60 Filing Fee, Certificate of Status & Certified Copy

CR2E055 (9/15)

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE  
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT  
BUSINESS IN FLORIDA**

**SECTION I (1-4 must be completed)**

1. Name of limited liability Company as it appears on the records of the Florida Department of

State: North Mary Brickell LLC

Enter new principal office address, if applicable: 26901 Malibu Hills Rd.

(Principal office address

MUST BE A STREET ADDRESS)

Calabasas, CA 91301

Enter new mailing address, if applicable:

(Mailing address

MAY BE A POST OFFICE BOX)

26901 Malibu Hills Rd.

Calabasas, CA 91301

2. The Florida document number of this limited liability company is: M17000007103

3. Jurisdiction of its organization: Arizona

4. Date authorized to do business in Florida: 08/17/2017

**SECTION II (5-9 complete only the applicable changes)**

5. New name of the limited liability company: N/A  
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

6. If amending the registered agent and/or registered officer address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: Corporation Service Company

New Registered Office Address: 1201 Hays Street

Enter Florida Street Address

Tallahassee

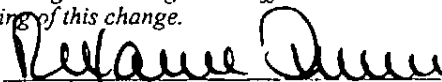
Florida 32301

City

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*



**Roxanne Turner**  
Asst. Vice President

If Changing Registered Agent, Signature of New Registered Agent

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

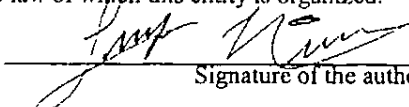
N/A

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

Sam Fox Removed. The Cheesecake Factory Restaurants, Inc. is the new manager.  
North Restaurants LLC is now the sole member.

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Founder	Fox, Sam	4455 E. Camelback Road, B100	<input type="checkbox"/> Add
		Phoenix, AZ 85018	<input checked="" type="checkbox"/> Remove
Manager	The Cheesecake Factory Restaurants, Inc.	26901 Malibu Hills Rd.	<input checked="" type="checkbox"/> Add
		Calabasas, CA 91301	<input type="checkbox"/> Remove
Member	North Restaurants LLC	26901 Malibu Hills Rd.	<input checked="" type="checkbox"/> Add
		Calabasas, CA 91301	<input type="checkbox"/> Remove
<u>N/A</u>			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
<u>N/A</u>			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

9. Attached is a certificate, if required: no more than 90 days old, evidencing the  
aforementioned amendment(s), duly authenticated by the official having custody of records in the  
jurisdiction under the law of which this entity is organized.

  
\_\_\_\_\_  
Signature of the authorized representative

Lindsey Nielson  
\_\_\_\_\_  
Typed or printed name of signee

Filing Fee: \$25.00