

M24000014502

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

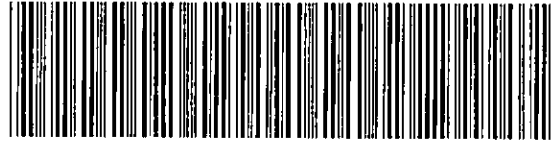
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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APPROVED
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2024 NOV 14 PM 2:19

NOTARY PUBLIC
141 ALABAMA AVE
MONTGOMERY, AL 36102

RECEIVED

2024 NOV 14 PM 3:38

NOTARY PUBLIC
141 ALABAMA AVE
MONTGOMERY, AL 36102

NOV 15 2024

C. Brumley



CSC - Tallahassee
1201 Hays Street
Tallahassee, FL 32301-2607
850-558-1500, Ext: x62969

To: Department Of State, Division Of Corporations
From: Amanda Miller
Ext: x62969
Date: 11/14/24
Order #: 1679033-1
Re: Flower Child Sarasota LLC
Processing Method: Routine

A handwritten signature in black ink, appearing to read 'Amanda Miller', is written over the signature line.

TO WHOM IT MAY CONCERN:

Enclosed please find:

Application for Certificate of Authority

Amount to be deducted from our State Account: \$125.00 - FL State Account Number:
120000000195

Please take the following action:

File in your office on basis
Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FLOWER CHILD SARASOTA LLC
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

LINDSEY MARTINSON

Name of Person

THE CHEESECAKE FACTORY INCORPORATED

Firm/Company

26901 MALIBU HILLS RD

Address

CALABASAS HILLS, CA 91301

City/State and Zip Code

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

For further information concerning this matter, please call:

LINDSEY MARTINSON

818

871-3000

at ()

Name of Contact Person

Area Code

aytime 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

Please make check payable to: FLORIDA DEPARTMENT OF STATE

☒ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy

☐ \$160.00 Filing Fee, Certificate
of Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS
IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. FLOWER CHILD SARASOTA LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. ARIZONA
(Jurisdiction under the law of which foreign limited liability company is organized)

3. _____
(FEI number, if applicable)

4. 11/11/24
(Date first transacted business in Florida, if prior to registration)
See sections 605.0904 & 605.0905, F.S. to determine penalty liability

5. 26901 MALIBU HILLS RD
(Street Address of Principal Office)

6. 26901 MALIBU HILLS RD
(Mailing Address)

CALABASAS, CA 91301

CALABASAS, CA 91301

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Corporation Service Company

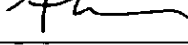
Office Address: 1201 Hays Street

Tallahassee 32301
(City) Florida (Zip code)

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, 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.

Corporation Service Company

By: 
(Registered agent's signature)

APPROVED
AND
FILED
2024 NOV 14 PM 2:19
CLERK OF STATE
TALLAHASSEE, FLORIDA

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<input type="checkbox"/> Manager	Name: <u>Flowerchild Holding Company LLC</u>	<input checked="" type="checkbox"/> Manager	Name: <u>The Cheesecake Factory Restaurants, Inc.</u>
<input checked="" type="checkbox"/> Member	Address: <u>26901 Malibu Hills Rd.</u>	<input type="checkbox"/> Member	Address: <u>26901 Malibu Hills Rd.</u>
<input type="checkbox"/> Authorized	<u>Calabasas, CA 91301</u>	<input type="checkbox"/> Authorized	<u>Calabasas, CA 91301</u>
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
 <input type="checkbox"/> Manager	Name: <u>Scarlett May</u>	 <input type="checkbox"/> Manager	Name: <u>Matt Clark</u>
<input type="checkbox"/> Member	Address: <u>26901 Malibu Hills Rd.</u>	<input type="checkbox"/> Member	Address: <u>26901 Malibu Hills Rd.</u>
<input checked="" type="checkbox"/> Authorized	<u>Calabasas, CA 91301</u>	<input checked="" type="checkbox"/> Authorized	<u>Calabasas, CA 91301</u>
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
 <input type="checkbox"/> Manager	Name: <u>David Overton</u>	 <input type="checkbox"/> Manager	Name: <u>Cheryl Slomann</u>
<input type="checkbox"/> Member	Address: <u>26901 Malibu Hills Rd.</u>	<input type="checkbox"/> Member	Address: <u>26901 Malibu Hills Rd.</u>
<input checked="" type="checkbox"/> Authorized	<u>Calabasas, CA 91301</u>	<input checked="" type="checkbox"/> Authorized	<u>Calabasas, CA 91301</u>
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Scarlett May

Signature of an authorized person

Scarlett May

Typed or printed name of signer

STATE OF ARIZONA



Office of the CORPORATION COMMISSION

CERTIFICATE OF GOOD STANDING

I, the undersigned Executive Director of the Arizona Corporation Commission, do hereby certify that:

FLOWER CHILD SARASOTA LLC

ACC file number: 23703384

was incorporated under the laws of the State of Arizona on 07/11/2024, and that, according to the records of the Arizona Corporation Commission, said limited liability company is in good standing in the State of Arizona as of the date this Certificate is issued.

This Certificate relates only to the legal existence of the above named entity as of the date this Certificate is issued, and is not an endorsement, recommendation, or approval of the entity's condition, business activities, affairs, or practices.

IN WITNESS WHEREOF, I have hereunto set my hand, affixed the official seal of the Arizona Corporation Commission, and issued this Certificate on this date: 11/11/2024



A handwritten signature in black ink, reading "Douglas R. Clark".

Douglas R. Clark, Executive Director