## 2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000004383

Entity Name: RESTAURANT ASSOCIATES, LLC

**Current Principal Place of Business:** 

NEW YORK, NY 10001

132 WEST 31ST STREET, 6TH FLOOR

## **Current Mailing Address:**

C/O TAX DEPT 2400 YORKMONT RD CHARLOTTE, NC 28217

Certificate of Status Desired: No FEI Number: 54-2107225

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

**FILED** Mar 10, 2023

**Secretary of State** 

6097980018CC

## Authorized Person(s) Detail:

Title SOLE MEMBER Title PRESIDENT & CFO Name RESTAURANT ASSOCIATES, INC. Name MEREDITH, ADRIAN Address 330 FIFTH AVENUE 5TH FLOOR Address 2400 YORKMONT RD CHARLOTTE NC 28217 City-State-Zip: City-State-Zip: NEW YORK NY 10001

SR VICE PRESIDENT AND Title

TREASURER

Name THOMAS, DANIEL 2400 YORKMONT RD Address City-State-Zip: CHARLOTTE NC 28217

ASST SECRETARY Title Name ROSSITCH, RICHARD Address 2400 YORKMONT RD City-State-Zip: CHARLOTTE NC 28217 Title EXE VP, GENERAL COUNSEL &

**SECRETARY** 

Name MCCONNELL. JENNIFER Address 2400 YORKMONT RD City-State-Zip: CHARLOTTE NC 28217

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JENNIFER MCCONNELL

EXE VP, GENERAL **COUNSEL AND SECRETARY** 

03/10/2023