

F12000004241

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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RE-SUBMIT

To:

Division of Corporations
Fax Number : (850) 617-6381

Please retain original filing
date of submission 10/15

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5368

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FOREIGN PROFIT/NONPROFIT CORPORATION**RMH Franchise Corporation**

Certificate of Status	0
Certified Copy	0
Page Count	0806
Estimated Charge	\$70.00

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October 16, 2012

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CT

SUBJECT: RMH FRANCHISE CORPORATION
REF: W12000052937

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The registered agent must sign accepting the designation.

If you have any further questions concerning your document, please call (850) 245-6052.

Justin M Shivers
Regulatory Specialist II
New Filing Section

FAX Aud. #: H12000249317
Letter Number: 412A00025434

P.O BOX 6327 - Tallahassee, Florida 32314

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: RMH Franchise Corporation

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Jeffrey Neumann, President

Name of Person

RMH Franchise Corporation

Firm/Company

1133 Connecticut Avenue, NW, Suite 700

Address

Washington, DC 20036

City/State and Zip code

jneumann@codacap.com

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

For further information concerning this matter, please call:

Elizabeth Hamelin, Esq.

at (202) 637-6881

Name of Person

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

☐ \$70.00 Filing Fee

☐ \$78.75 Filing Fee &
Certificate of Status

☐ \$78.75 Filing Fee &
Certified Copy

☒ \$87.50 Filing Fee,
Certificate of Status &
Certified Copy

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

**IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.**

1. RMH Franchise Corporation
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
- (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. Kansas 3. 37-1701807
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 09/10/2012 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 1133 Connecticut Avenue, NW, Suite 700, Washington, DC 20036
(Principal office address)
Same
(Current mailing address)
8. To engage in the restaurant business and for any lawful act or activity for which corporations may be authorized in Florida
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
- Name: C T Corporation System
- Office Address: 1200 South Pine Island Road
- Plantation, Florida 33324
(City) (Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation 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.

C T Corporation System

By:

Connie Bryan
(Registered agent's signature)

Connie Bryan
Assistant Secretary

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Daniel Jiniok, Sole Director

Address: 1133 Connecticut Avenue, NW, Suite 700, Washington, DC 20036

Vice Chairman:

Address:

Director:

Address:

Director:

Address:

B. OFFICERS

President: Jeffrey Neumann

Address: 1133 Connecticut Avenue, NW, Suite 700, Washington, DC 20036

Vice President:

Address:

Secretary: Daniel Jiniok

Address: 1133 Connecticut Avenue, NW, Suite 700, Washington, DC 20036

Treasurer: Joseph Leone, CFO and Treasurer

Address: 1133 Connecticut Avenue, NW, Suite 700, Washington, DC 20036

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.133, F.S.

14. Joseph Leone, CFO and Treasurer

(Typed or printed name and capacity of person signing application)

12 OCT 15 AM 9:43
ALABAMA SECRET OF STATE

STATE OF KANSAS
OFFICE OF
SECRETARY OF STATE
KRIS W. KOBACH

I, KRIS W. KOBACH, Secretary of State of the state of Kansas, do hereby certify, that according to the records of this office.

Business Entity ID Number: 4647491

Entity Name: RMH FRANCHISE CORPORATION

Entity Type: DOM: FOR PROFIT CORPORATION

State of Organization: KS

Resident Agent: THE CORPORATION COMPANY, INC.

Registered Office: 112 S.W. SEVENTH STREET SUITE 3C, TOPEKA, KS 66603

was filed in this office on September 10, 2012, and is in good standing, having fully complied with all requirements of this office.

No information is available from this office regarding the financial condition, business activity or practices of this entity.



In testimony whereof I execute this certificate and affix the seal of the Secretary of State of the state of Kansas on this day of October 12, 2012

KRIS W. KOBACH
SECRETARY OF STATE

Certificate ID: 558210 - To verify the validity of this certificate please visit <https://www.kansas.gov/bess/flow/validate> and enter the certificate ID number.

12 OCT 15 AM 9:43
STATE OF KANSAS
TALLAHASSEE, FLORIDA