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(Requestor's Name)

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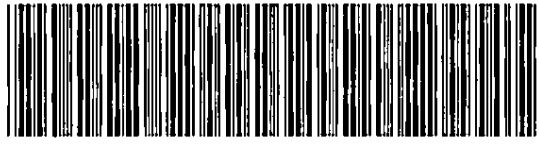
(Business Entity Name)

(Document Number)

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STATE OF FLORIDA

2/13/21



August 9, 2021

**BY FEDERAL EXPRESS**

Florida Department of State  
Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Ste. 810  
Tallahassee, FL 32303

**RE: Marco's Slice of Support, Inc./Application By Foreign Not For Profit Corporation  
For Authorization To Conduct Its Affairs In Florida**

Dear Madam or Sir:

Enclosed are the following with respect to Marco's Slice of Support, Inc., an Ohio not for profit corporation:

1. Cover Letter;
2. Application By Foreign Not For Profit Corporation For Authorization To Conduct Its Affairs in Florida;
3. Certificate of Good Standing issued by the Ohio Office of the Secretary of State on August 6, 2021; and
4. Check in the amount of \$70.00 with respect to the associated filing fee.

Please process the Application in accordance with your standard procedures and upon Registration, return the Letter of Acknowledgment to my attention in the enclosed, self-addressed stamped envelope.

If you have any questions or require additional information or documentation to complete this request, please do not hesitate to contact me at [cadam@marcos.com](mailto:cadam@marcos.com) or by phone at 419.410.4175.

Sincerely,

**Marco's Franchising, LLC**

Chrissy Adam  
Corporate Paralegal

Enclosures

cc: Ashley Weis, Corporate Counsel

### COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Marco's Slice of Support, Inc.  
Name of Corporation – must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", or "Certificate of Status" and check are submitted to register the above referenced not for profit corporation to conduct its affairs in Florida.

Please return all correspondence concerning this matter to the following:

Ashley Weis, Corporate Counsel  
Name of Person

Marco's Slice of Support, Inc.  
Firm/Company

5252 Monroe Street  
2nd Floor  
Address

Toledo, OH 43623  
City/State and Zip Code

legal@marcos.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Chrissy Adam at ( 419 ) 410.4175  
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:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

- \$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 NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:*

1. Marco's Slice of Support, Inc.

(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Ohio 3. 47-5241959  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 09/21/2015 5. \_\_\_\_\_  
(Date of Incorporation) (Date of duration, if other than perpetual)

6. \_\_\_\_\_  
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)

7. 5252 Monroe Street, Toledo, OH 43623  
(Principal office street address)

(Current mailing address, if different)

8. See Exhibit A attached hereto  
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

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

Name: Corporation Service Company

Office Address: 1201 Hays Street  
Tallahassee, Florida 32301  
(City) (Zip Code)

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**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.*

*Michelle Disbrow*

(Registered agent's signature)

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. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

**A. DIRECTORS**

Chairman Name: Bonnie Huff

Vice Chairman Address: 5252 Monroe Street

Director Toledo, OH 43623

President \_\_\_\_\_

Vice President \_\_\_\_\_

Secretary  Treasurer

Other: Board Member  Other: \_\_\_\_\_

Chairman Name: Angelo Ialacci

Vice Chairman Address: 5252 Monroe Street

Director Toledo, OH 43623

President \_\_\_\_\_

Vice President \_\_\_\_\_

Secretary  Treasurer

Other: Board Member  Other: \_\_\_\_\_

Chairman Name: Timothy Brown

Vice Chairman Address: 5252 Monroe Street

Director Toledo, OH 43623

President \_\_\_\_\_

Vice President \_\_\_\_\_

Secretary  Treasurer

Other: Board Member  Other: \_\_\_\_\_

Chairman Name: Cathy Curry

Vice Chairman Address: 5252 Monroe Street

Director Toledo, OH 43623

President \_\_\_\_\_

Vice President \_\_\_\_\_

Secretary  Treasurer

Other: Board Member  Other: \_\_\_\_\_

Chairman Name: Jim Strachan

Vice Chairman Address: 5252 Monroe Street

Director Toledo, OH 43623

President \_\_\_\_\_

Vice President \_\_\_\_\_

Secretary  Treasurer

Other: Board Member  Other: \_\_\_\_\_

Chairman Name: \_\_\_\_\_

Vice Chairman Address: \_\_\_\_\_

Director \_\_\_\_\_

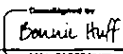
President \_\_\_\_\_

Vice President \_\_\_\_\_

Secretary  Treasurer

Other: \_\_\_\_\_  Other: \_\_\_\_\_

**NOTE: 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.

13.   
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Bonnie Huff Board Member/Treasurer  
(Typed or printed name and capacity of person signing application)

## EXHIBIT A

### Purposes:

The Corporation is organized exclusively for religious, charitable, scientific, literary or educational purposes and shall at all times be operated in such manner as to qualify as an organization exempt from federal income taxes under Section 501(c)(3) of the Internal Revenue Code of 1986 (or the corresponding provision of any United States Internal Revenue Law) as such section may be interpreted by valid regulations and Internal Revenue Service rulings and determinations. Subject to the foregoing, said purposes may include, but shall not be limited to, the following purposes:

- (a) To extend charitable aid to the employees and families of employees within the network of Marco's Pizza in cases of death, hardship or disability;
- (b) To do such other activities and provide such other services as are necessary or desirable for the accomplishment of the above stated purposes, so long as such activities and services are permitted under the Ohio Nonprofit Corporation Law and will not jeopardize the Corporation's qualification as an organization exempt from federal income taxes under Section 501(c)(3) of the Internal Revenue Code of 1986 (or the corresponding provision of any United States Internal Revenue Law).

Said purposes shall also include the making of distributions to with organizations that qualify as exempt organizations under Section 501(c)(3) of the Internal Revenue Code of 1986 (or the corresponding provision of any United States Internal Revenue Law).

UNITED STATES OF AMERICA  
STATE OF OHIO  
OFFICE OF THE SECRETARY OF STATE

*I, Frank LaRose, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show MARCO'S SLICE OF SUPPORT, INC., an Ohio not for profit corporation, Charter No. 2430194, having its principal location in Toledo, County of Lucas, was incorporated on September 21, 2015 and is currently in GOOD STANDING upon the records of this office.*



*Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 6th day of August, A.D. 2021.*

A handwritten signature in black ink, appearing to read "Frank LaRose".

**Ohio Secretary of State**

Validation Number: 202121803258