# F23000005591

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2023 SEP 21 PM 2:

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### WEGMANS FOOD MARKETS, INC.

1500 BROOKS AVENUE, P.O. BOX 30844 ROCHESTER, NEW YORK 14603-0844

JULIET MENDOLA LEGAL OPERATIONS ADMINISTRATOR

(585) +29-3005 Fax: (585) +64-4636

September 18, 2023

Registration Section Division of Corporations PO Box 6327 Tallahassee, FL 32314

RE: Filing of a Foreign Corporation – Wegmans Food Markets, Inc.

Dear Sir or Madam:

Enclosed please find our completed Cover Letter, Application by Foreign Corporation for Authorization to Transact Business in Florida, check in the amount of \$70.00 for the filing fee, and our original Certificate of Existence from the state of New York. I believe I have included all the necessary documentation to file Wegmans Food Markets, Inc. as a foreign corporation in state of Florida.

I have included a self-addressed stamped envelope if you would please send the letter of acknowledgment to my attention. Please contact me at the above-referenced telephone number if you have any questions or require additional information.

Sincerely,

Juliet Mendola

\JEM Enclosures

## **COVER LETTER**

	egistration Section vivision of Corporation	ns			
SUBJEC	CT: Wegmans Food M	arkets, Inc.			
		Name of corporation	- must include suffix		
Dear Sir o	or Madam:				
"Certifica	te of Existence," or "		Authorization to Transac ding" and check are subr ss in Florida.		
Please ret	urn all correspondenc	e concerning this matter	to the following:		
Juliet Men	dola, Legal Department				
		Name of	Person		
Wegmans	Food Markets, Inc.				
		Firm/Com	pany		
1500 Broo	ks Avenue, PO Box 308	344			
		Addre	ess	<del></del>	
Rochester,	NY 14603-0844				
		City/State a	nd Zip code		
juliet.meno	dola@wegmans.com				
	E-m	ail address: (to be used f	or future annual report no	otification)	
For furthe	er information concern	ning this matter, please o	all:		
Juliet Mendola		at ( <sup>585</sup>	429-3005		
Name of Person		Area Cod	Daytime Teleph	one Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		ns see , Suite 810	Registration Se Division of Co P.O. Box 6327	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Please mak	Filing Fee	ORIDA DEPARTMENT	OF STATE 378.75 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.

(If name unava	uilable in Florida, enter alternate corporate nam			orida)	
2. New York		(FEI number, if applicable)			
(State or cour	licable)				
4		5			
(Da	ate of incorporation)	(Date of duration, if other than perpetual)			
6					
		ss in Florida, if prior to registration) 7.1502, F.S., to determine penalty liability	y)		
7. 1500 Brooks A	venue, Rochester, New York 14624				
	(Principal of	office street address)			
1500 Brooks A	venue, PO Box 30844, Rochester, NY 14603	3-0844			
	(Current ma	iling address, if different)			
8. Name and str	reet address of Florida registered agent: (1	P.O. Box NOT acceptable)	••• •••	2023 SEP	•.
Name:	Corporation Service Company		_	ф.	S
Office Address:	1201 Hays Street			21	
	Tallahassee	, Florida <u>32301</u>	-	PH 2	ماري 1-2-
	(City)	(Zip code)	-,	2: 08	
Having been no designated in th further agree to	gent's acceptance: med as registered agent and to accept se is application, I hereby accept the appoin comply with the provisions of all statute ar with and accept the obligations of my	ntment as registered agent and agree is relative to the proper and complete	e to act in this	at the plo s capacio	ty. I

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

under the law of which it is incorporated.

10. 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

#### A. DIRECTORS Daniel R. Wegman Colleen J. Wegman Name: Chairman ☐ Chairman 4885 West Lake Road One Elm Lane □ Vice Chairman Address: ☐ Vice Chairman Address: Canandaigua, NY 14424 Rochester, NY 14610 ■ Director Director □President President □Vice President \_\_\_\_ ☐ Vice President ☐ Secretary □Treasurer □ Secretary Treasurer Other CEO □Other \_\_\_\_ □ Other \_\_\_\_\_ □Other \_\_\_\_\_ Name: \_\_\_\_\_ Stephen R. Van Arsdale Name: \_\_\_\_\_ Chairman □ Chairman 85 Knollwood Drive 21 Ryan Road ☐ Vice Chairman ☐ Vice Chairman Address: Address: Rochester, NY 14618 Macedon, NY 14502 Director □ Director ☐ President President □Vice President ☐ Vice President □ Secretary Treasurer ■ Secretary ☐ Treasurer Senior Vice Presic Other \_ □Other \_\_\_\_\_ □Other \_\_\_\_\_ □Other \_\_\_\_\_ ☐ Chairman Name: \_\_\_\_\_ Name: \_\_\_\_\_ Chairman □ Vice Chairman Address: \_\_\_\_\_ ☐ Vice Chairman Address: □ Director □ Director President □ President □ Vice President ☐ Vice President ☐ Secretary Treasurer ☐ Secretary Treasurer □Other \_\_\_\_ □Other \_\_\_\_\_ □Other \_\_\_\_ 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. Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 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.817.155, F.S.

Stephen R. Van Arsdale, Secretary

#### STATE OF NEW YORK

#### DEPARTMENT OF STATE

#### Certificate of Status

I, ROBERT J. RODRIGUEZ, Secretary of State of the State of New York and custodian of the records required by law to be filed in my office, do hereby certify that upon a diligent examination of the records of the Department of State, as of the date and time of this certificate, the following entity information is reflected:

**Entity Name:** 

WEGMANS FOOD MARKETS, INC.

DOS ID Number:

1199686

**Entity Type:** 

DOMESTIC BUSINESS CORPORATION

**Entity Status:** 

**EXISTING** 

Date of Initial Filing with DOS:

09/03/1987

**Statement Status:** 

**CURRENT** 

Statement Due Date:

09/30/2023

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



WITNESS my hand and official seal of the Department of State, at the City of Albany, on August 17, 2023 at 10:42 A.M.

ROBERT J. RODRIGUEZ, Secretary of State

Brandon Co Hughan

By Brendan C. Hughes

**Executive Deputy Secretary of State** 

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