KELLY & PASSIDOMO, LLP ATTORNEYS AT LAW GREY OAKS BUILDING 2640 GOLDEN GATE PARKWAY, SUITE 305 NAPLES, FLÖRIDA 34105 City/State/Zip Phone # Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) ****125.00 ****125.00 (Corporation Name) (Document #) (Corporation Name) _ (Document #) ☐ Walk in Pick up time Certified Copy ☐ Photocopy ☐ Mail out ☐ Will wait Certificate of Status **NEW FILINGS AMENDMENTS** ☐ Profit Amendment Not for Profit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent Dissolution/Withdrawal Domestication Other Merger **OTHER FILINGS** REGISTRATION/QUALIFICATION Annual Report □ Foreign Fictitious Name Limited Partnership Reinstatement Trademark Other **Examiner's Initials**

CR2E031(7/97)

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

IN COMPLIANCE WITH SECTION 608,503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: (Name of foreign limited liability company) 3. //- 34/899/ (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) (Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.) 8. If limited liability company is a manager-managed company, check here 9. The name and usual business addresses of the managing members or managers are as follows: SEE ATTACHED STATEMENT 10. Attached is an original 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. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: Wholesale DISTERBUTOR Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

KRIAN EMMER

Typed or printed name of signee





Where the Restaurants Shop ®

15-24 132nd Street, Flushing, New York 11356 Tel. (718) 762-8700 • Fax (718) 463-8058

RESTAURANT DEPOT ENTERPRISES, LLC.

A Delaware Limited Liability Company Incorporated on January 15, 1998

CORPORATE OFFICERS & MEMBERS

Stanley Fleishman	Address:	15-24 132 nd Street, Flushing, NY 11356
President		
Richard Kirschner	Address:	15-24 132 nd Street, Flushing, NY 11956
Vice President, Asst. Treasurer &		
Asst. Secretary		= = = = = = = = = = = = = = = = = = =
Morris Lebowitz	Address:	15-24 132 nd Street, Flushing, NY 11356
Vice President & Asst. Secretary		
Samuel Rubanenko	Address:	2300 57 th Street, Vernon, CA 90058 🔁 💍
Vice President		235
Brian E. Emmert	Address:	15-24 132 nd Street, Flushing, NY 1356
Vice President, Treasurer		_
Secretary & Chief Financial Officer		
Lawrence Cohen	Address:	15-24 132 nd Street, Flushing, NY 11356
Vice President & Chief Operating		
Officer – Member		
Clark Pager	Address:	15-24 132 nd Street, Flushing, NY 11356
Vice President – Member		

STATEMENT #1

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

STATE OF FLORIDA.		
1. The name of the Limited Liability Compa	ny is:	
RESTAURANT DEPOT	ENTERMISES LLC	
2. The name and the Florida street address of	f the registered agent and office are:	Fic ;
MICHAEL SAX	(Name) 12TH AVENUE TO BOY NOT ACCEPTABLE)	
2047 N.W.	12th AVENUE	Z6 9
Florida street add	ress (P.O. Box <u>NOT</u> ACCEPTABLE)	景见
Miani	FL 33127 City/State/Zip	9 III
	City/State/Zip	
		5 5
· · · · · · · · · · · · · · · · · · ·	, a v Tananda	and Ismital
liability company at the place designated in	to accept service of process for the above sto this certificate, I hereby accept the appointm acity. I further agree to comply with the pro-	visions of all
registered agent and agree to act it in the	performance of my duties, and I am familiar severed agent as provided for in Chapter 608,	with and
statutes relating to the proper that competers	istered agent as provided for in Chapter 608,	F.S
accept the obligations of my positions		
T. White I	De 2	
(Signature)		
	Filing Fee for Application	
\$ 100.0	transfer to the second	
\$ 25.0 \$ 30.0		
\$ 30.0 \$ 5.0		

State of Delaware Office of the Secretary of State

PAGE 1

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "RESTAURANT DEPOT ENTERPRISES, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-EIGHTH DAY OF MARCH, A.D. 2001.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

O1 APR -9 PM ID: 51



Darriet Smith Windson Harriet Smith Windson

AUTHENTICATION: 1049911

DATE: 03-28-01

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