

Division of Corporations

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To: Division of Corporations
 Fax Number : (850)617-6383

From: Account Name : CORPORATE CREATIONS INTERNATIONAL INC.
 Account Number : 110432003053
 Phone : (561)694-8107
 Fax Number : (561)694-1639

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

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**Foreign Limited Liability Company
Sbarro LLC**

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$130.00

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15 SEP 14 PM 4:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SEP 15 2015
D. BRUCE

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Sbarro LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," or "LLC.")

(If name is unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing member adopting the alternate name. The alternate name must include "Limited Liability Company," "LLC," or "LLC.")

2. New York
(Jurisdiction under the law of which foreign limited liability company is organized)

3. _____
(FEI Number if applicable)

4. NOVEMBER 17, 2011
(Date of Organization)

5. perpetual
(Duration: Year Limited Liability Company will cease to exist or "perpetual")

6. upon filing of this application
(Date first transacted business in Florida, if prior to registration.)

7. 1328 Dublin Road
Columbus, OH 43215
(Principal Office Address)

1328 Dublin Road
Columbus, OH 43215
(Mailing Address)

8. If limited liability company is manager-managed company, click here

9. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:
J. David Karam, Manager
Mira Kicker, Manager
Mark S. Inzetta, Manager
Gerard Lewis, Manager
Arne Fritz, Manager
Rohan Shearer, Manager

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.)


Signature of a member or an authorized representative of a member.
(In accordance with section 605.0203(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true)
Mark S. Inzetta, Manager
Typed or printed name of signee

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

Sbarro LLC

If unavailable, the alternate to be used in the state of Florida is:

2. The name and the Florida street address of the registered agent and office are:

Corporate Creations Network Inc.

 (Name)

11380 Prosperity Farms Road #221E

 Florida Street Address (P.O. Box NOT ACCEPTABLE)

Palm Beach Gardens FL 33410

 City/State/Zip

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Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, Florida Statutes.

Corporate Creations Network Inc. 

 (Signature)

Caitlin Lazarus, Special Secretary

- \$ 100.00 Filing Fee for Application
- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (optional)
- \$ 5.00 Certificate of Status (optional)

**State of New York
Department of State } ss:**

I hereby certify, that NEW SBARRO LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 11/17/2011, and that the Limited Liability Company is existing so far as shown by the records of the Department. I further certify the following:

A Certificate of Merger and Name Change, changing its name to SBARRO LLC was filed on 11/18/2011.

A Certificate of Publication of SBARRO LLC was filed on 01/06/2012.

A Biennial Statement was filed 12/10/2013.

Certificate of Change was filed on 05/15/2015.

Certificate of Change was filed on 07/02/2015.

I further certify, that no other documents have been filed by such Limited Liability Company.



*Witness my hand and the official seal
of the Department of State at the City
of Albany, this 19th day of August
two thousand and fifteen.*

A handwritten signature in cursive script that reads "Anthony Giardino".

Anthony Giardino
Executive Deputy Secretary of State