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(Re	questor's Name)	
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PICK-UP	WAIT	MAIL
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Special Instructions to	Filing Officer:	

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18 MAY -1 PH 4:29

J. LEGGETT MAY 02 2018 CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT	\sim	_	I20000000195
AUUUNIN	1011.1	•	

REFERENCE: 189529 4324340

AUTHORIZATION

COST LIMIT :

ORDER DATE : May 1, 2018

ORDER TIME : 2:59 PM

ORDER NO. : 189529-010

CUSTOMER NO: 4324340

FOREIGN FILINGS

NAME: CONSOLIDATED BURGER A, LLC

XXXX_ QUALIFICATION (TYPE: <u>LL</u>)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

__ CERTIFIED COPY XX PLAIN STAMPED COPY ____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER:

COVER LETTER

TO:

Registration Section

Divisio	on of Corporation	ıs				
Co UBJECT:	onsolidated Burge	r A. LLC				
		Name of I	Limited Liability (Company		
					ansact Business in Florida," (y company to transact busine	
lease return all	correspondence o	concerning this matter to the	following:			
	William Ogden					
		N:	ame of Person			
	c/o Union Capi	tal Associates				
		Fi	rm/Company			
	485 West Putna	am Avenue				
			Address		•	
	Greenwich, CT	06830				
		City/S	tate and Zip Code			
	bill@unioncapita	deorp.com				
		E-mail address: (to be used	for future annual	report no	tification)	
For further infor	rmation concernin	g this matter, please call:				
Willia	m Ogden		203 at (580-57		
	Name o	f Contact Person	Area Code	Day	rtime Telephone Number	
Divisio Registr P.O. Bo	ING ADDRESS: on of Corporations ration Section ox 6327 assee, FL 32314			Division Registrat Clifton B 2661 Exe	of Corporations ion Section suilding ecutive Center Circle see, FL 32301	
	eck for the follow 5.00 Filing Fee	ing amount: S130.00 Filing Fee & Certificate of Status	S155.00 Filir Certified Copy	ng Fee &	☐ \$160.00 Filing Fee, Cer of Status & Certified Copy	

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTEN THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN TAMITED HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	, LLC Limited Liability Company, must include "Limited	a raaniny C	ompany, E.E.C., or take	. ,			
If name unavailable, enter alternate in	ame adopted for the purpose of transacting business in Flo	nda. The altern	ate name most include "Limited	Liability Cor	mpany," "L.L.C."	or "LLC.")	
). Delaware		3. 8	2-3772910		 		
(Jurisdiction under the law of w)	nch foreign limited hability company is organized)		(l'El r	amber, if app	plicable)		
ł. <u></u>							
	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determi	registration) ine penalty liab	ility)				
c/o Union Capital Asso		6. c/	o Union Capital Assoc	iates, L.I	P		
(Street Address of I	•	.19	(Mailing 85 West Putnam Avens			<u>ئ</u>	
485 West Putnam Ave	nue		reenwich, CT 06830		•	7	
Greenwich, CT 06830			reenwich, CT 008.50		<u> </u>	<u> </u>	
		NOT	. 11 >		10 A		
7. Name and street addres	ss of Florida registered agent: (P.O. Box	NOT acc	eptable)		. • .	1	
Name:	Corporation Service Company				5-6		٠٠
Office Address:	1201 Hays Street					5	
Childe Address.					•		
	Tallahassee (Cny)		, Florida <u>32301</u> (Zap				
designated in this applicate comply with the provis	gistered agent and to accept service of a tion, I hereby accept the appointment a ions of all statutes relative to the proper s of my position as registered agent.	s registere	ed agent and agree to	act in thi	s capacity. , and I am J	l further	agree with
Having been named as re designated in this applica to comply with the provis	gistered agent and to accept service of patient, I hereby accept the appointment a sions of all statutes relative to the proper	s registere and comp	ed agent and agree to	act in thi	s capacity. , and I am J	I further amiliar 1 <mark>ne Tu</mark> i	agree with nor
Having been named as redesignated in this applicate to comply with the provisand accept the obligation	gistered agent and to accept service of action, I hereby accept the appointment at ions of all statutes relative to the proper s of my position as registered agent. Corporation Service Company By: (Registered agent's	s registere and comp Quesignature)	ed agent and agree to collete performance of r	uct in thi ny duties	s capacity. , and I am J Roxal	I further amiliar 1 <mark>ne Tu</mark> i	agree with nor
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Typed or printed name of signee

William Ogden, Secretary

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "CONSOLIDATED BURGER A, 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 FIRST DAY OF MAY, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CONSOLIDATED BURGER A, LLC" WAS FORMED ON THE THIRTEENTH DAY OF DECEMBER, A.D. 2017.

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

Authentication: 202613233

Date: 05-01-18