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HARRIS

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 189529 4324340

AUTHORIZATION :

COST LIMIT : \$ (1/2)5...00

ORDER DATE: May 1, 2018

ORDER TIME : 3:02 PM

ORDER NO. : 189529-020

CUSTOMER NO: 4324340

FOREIGN FILINGS

NAME: CONSOLIDATED BURGER HOLDINGS,

LLC

XXXX QUALIFICATION (TYPE: LL)

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

Registration Section Division of Corporations

TO:

SUBJECT:	Consolidated Burge	_				
SUBJECT		Name of I	imited Liability Co	ompany		
The enclosed Existence, at	d "Application by For ad check are submitte	eign Limited Liability Comp d to register the above refere	any for Authorizati nced foreign limite	on to Tra d liability	nsact Business in Florida," Certificate company to transact business in Flori	of da.
Please return	all correspondence o	oncerning this matter to the	following:			
	William Ogden					
	 	Na	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	dcorp.com				
		E-mail address: (to be used	for future annual r	report not	ification)	
For further i	nformation concernin	g this matter, please call:				
Wi	illiam Ogden		203 at (580-57-		
_	Name o	f Contact Person	Area Code	Day	time Telephone Number	
Div Reg P.C	AILING ADDRESS: vision of Corporations gistration Section). Box 6327 llahassee, FL 32314			Division (Registrati Clifton B 2661 Exe	ADDRESS: of Corporations on Section uilding cutive Center Circle ee, FL 32301	
	a check for the follow \$125.00 Filing Fee	ing amount: S130.00 Filing Fee & Certificate of Status	□ \$155.00 Filing Certified Copy	g Fee &	□ \$160.00 Filing Fee, Certificate of Status & Certified Copy	

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

IN COMPLIANCE WITH SECTION 605,0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(If nar	ne mavadable, enter alternate n	ame adopted for the purpose of transacting business in Flo	orida. The alternate name must include "Limited	Liability Company," "L. L. C," or "LLC,")			
₂ D	elaware		3 82-3766767				
		hich foreign limited liability company is organized)	• ' •	number, if applicable)			
4		(Date first transacted business in Florida, if prior to	registration)				
	-/-	(See sections 605,0904 & 605,0905, F.S. to determ					
5.	c/o Union Capital Asso (Street Address of I	ociates, L.P.	6. Co Union Capital Assoc				
4	185 West Putnam Ave	•	485 West Putnam Avenue				
Greenwich, CT 06830			Greenwich, CT 06830	<u>@</u>			
_				· · · · · · · · · · · · · · · · · · ·			
- .			NOT	1 2 - C 1 2 -			
7. r	same and street addres	s of Florida registered agent: (P.O. Box	(NOT acceptable)	Grant Towns			
	Name:	Corporation Service Company		Extension Control			
	00° - 11	1201 Hays Street					
	Office Address:			2 : Vi			
		Tallahassee (City)	, Florida <u>32301</u>				
desi; to co	gnated in this applica omply with the provisi	gistered agent and to accept service of tion, I hereby accept the appointment a tions of all statutes relative to the proper s of my position as registered agent. Corporation Service Company	is registered agent and agree to a	nct in this capacity. I further agre my duties, and I am familiar with Roxanne Turner	ec		
design conditions design desig	gnated in this applica omply with the provisi accept the obligation. The name, title or cap:	tion, I hereby accept the appointment a tions of all statutes relative to the proper to of my position as registered agent. Corporation Service Company By: (Registered agent's acity and address of the person(s) who have	is registered agent and agree to a r and complete performance of n	nct in this capacity. I further agree my duties, and I am familiar with Roxanne Turner Asst. Vice President	ec		
design conditions design desig	gnated in this applica omply with the provisi accept the obligation.	tion, I hereby accept the appointment a ions of all statutes relative to the proper s of my position as registered agent. Corporation Service Company By: (Registered agent's	is registered agent and agree to a rand complete performance of n	nct in this capacity. I further agree my duties, and I am familiar with Roxanne Turner Asst. Vice Presiden	ec		
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Typed or printed name of signee

William Ogden, Secretary

Page 1



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

DELAWARE, DO HEREBY CERTIFY "CONSOLIDATED BURGER HOLDINGS, 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 HOLDINGS, 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: 202613236

Date: 05-01-18