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(Requestor's Name)

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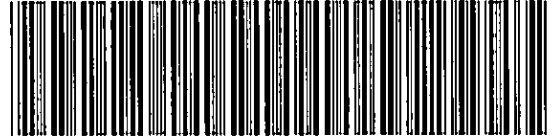
(Business Entity Name)

(Document Number)

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2020 JUN 17 AM 10:41

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# LARIBEE & HERTRICK, LLP

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RICHARD L. LARIBEE  
1944-2002  
CLARK R. COOPER  
1918-2004  
NEAL E. BOWERS  
1925-2008

June 11, 2020

**VIA U.S. Regular Mail**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

2020 JUN 17 PM 10:11

**Re: Registration of Foreign Limited Liability Company**

Dear Sir or Madam:

Romeo's Pizza Franchise, LLC ("Romeo's") desires to register as a foreign limited liability company in the State of Florida. To that end, enclosed please find:

- A check in the amount of \$125.00 for the filing fee for the Application and the Designation of Registered Agent;
- Florida's Cover Letter;
- Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida; and
- Certificate of Existence (from Ohio Secretary of State)

Please let me know when the application is approved. If there is an issue with the application, please contact me.

Very truly yours,

LARIBEE & HERTRICK, LLP

*Marc Hertrick*  
Marc R. Hertrick

Enclosure(s)

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Romeo's Pizza Franchise, LLC

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Marc R. Hertrick

\_\_\_\_\_  
Name of Person

Laribee & Hertrick, LLP

\_\_\_\_\_  
Firm/Company

325 N. Broadway Street

\_\_\_\_\_  
Address

Medina, Ohio 44256

\_\_\_\_\_  
City/State and Zip Code

mhertrick@laribee-hertrick.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Marc R. Hertrick

330

725-0531

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
Name of Contact Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☒ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &  
Certificate of Status

☐ \$155.00 Filing Fee &  
Certified Copy

☐ \$160.00 Filing Fee, Certificate  
of Status & Certified Copy

2020 JUN 17 14:10:11

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. Romeo's Pizza Franchise, LLC  
(Name of Foreign Limited Liability Company, must include "Limited Liability Company," "L.L.C.," or "LLC")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

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

3. \_\_\_\_\_  
(FLL number, if applicable)

4. Romeo's Pizza Franchise, LLC has not previously conducted business in Florida.

\_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability.)

5. 1113 Medina Road, Suite 200  
(Street Address of Principal Office)

6. 1113 Medina Road, Suite 200  
(Mailing Address)

Medina, Ohio 44256

Medina, Ohio 44256

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: CT Corporation System

Office Address: 1200 S. Pine Island Road, #250

Plantation 33324  
\_\_\_\_\_  
(City) (Zip code)

Florida  
\_\_\_\_\_  
(Zip code)

Registered agent's acceptance:

*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 application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

James Halpin James Halpin, Assistant Secretary  
(Registered agent's signature)

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<input type="checkbox"/> Manager	Name: <u>Ryan Rose</u>	<input type="checkbox"/> Manager	Name: _____
<input checked="" type="checkbox"/> Member	Address: <u>1113 Medina Road</u>	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	<u>Suite 200</u>	<input type="checkbox"/> Authorized	_____
Person	<u>Medina, OH 44256</u>	Person	_____
<input checked="" type="checkbox"/> Other <u>CEO</u>	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Manager	Name: _____	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: _____	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	_____	<input type="checkbox"/> Authorized	_____
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Manager	Name: _____	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: _____	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	_____	<input type="checkbox"/> Authorized	_____
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> 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.

9. Attached is a 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. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any 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.

Marc Hertrick  
Signature of an authorized person

Marc R. Hertrick  
Typed or printed name of signee

UNITED STATES OF AMERICA  
STATE OF OHIO  
OFFICE OF THE SECRETARY OF STATE

*I, Frank LaRose, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show ROMEO'S PIZZA FRANCHISE LLC, an Ohio For Profit Limited Liability Company, Registration Number 3942264, was organized within the State of Ohio on September 19, 2016, is currently in FULL FORCE AND EFFECT upon the records of this office.*



2020 JUN 17 AM 10:16  
Witness my hand and the seal of the  
Secretary of State at Columbus, Ohio  
this 4th day of June, A.D. 2020.

A handwritten signature in cursive script, appearing to read "Frank LaRose".

Ohio Secretary of State

Validation Number: 202015602446