

11/3/2020

Division of Corporations

M2000009925

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000381156 3)))



H200003811563ABC-

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.
Doing so will generate another cover sheet.

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)214-8442

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

Email Address: _____

Foreign Limited Liability Company WHITE CASTLE FLORIDA, LLC

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

RECEIVED
2020 NOV -3 AM 8:55

Electronic Filing Menu

Corporate Filing Menu

Help

US
11/4/20

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. WHITE CASTLE FLORIDA, 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.")

OHIO

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

3. _____
(FEI number, if applicable)

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

555 Edgar Waldo Way
5. _____
(Street Address of Principal Office)

555 Edgar Waldo Way
6. _____
(Mailing Address)

Columbus, OH 43215

Columbus, OH 43215

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

Name: Corporate Creations Network Inc.

Office Address: 801 US Highway 1

North Palm Beach, Florida 33408
(City) (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.



Joseph Panholzer, Special 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]:

Title or Capacity: **Name and Address:**

☐ Manager Name: White Castle System, Inc.

☒ Member Address: 555 Edgar Waldo Way

☐ Authorized Columbus, OH 43215

Person _____

☐ Other _____ ☐ Other _____

Title or Capacity: **Name and Address:**

☐ Manager Name: Elizabeth K. Ingram

☐ Member Address: 555 Edgar Waldo Way

☐ Authorized Columbus, OH 43215

Person _____

☒ Other CEO ☒ Other President

☐ Manager Name: Anthony Joseph

☐ Member Address: 555 Edgar Waldo Way

☐ Authorized Columbus, OH 43215

Person _____

☒ Other CAO ☒ Other Secretary

☐ Manager Name: Russell J. Meyer

☐ Member Address: 555 Edgar Waldo Way

☐ Authorized Columbus, OH 43215

Person _____

☒ Other CFO ☒ Other Treasurer

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____


Person _____

☐ Other _____ ☐ 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.


Signature of an authorized person

Joseph Panholzer, Attorney-in-Fact

Typed or printed name of signer

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 WHITE CASTLE FLORIDA, LLC, an Ohio For Profit Limited Liability Company, Registration Number 4566897, was organized within the State of Ohio on November 2, 2020, is currently in FULL FORCE AND EFFECT upon the records of this office.

State of Ohio
CT upon the
MAY - 3 PM 4: 44
FLORIDA



*Witness my hand and the seal of the
Secretary of State at Columbus, Ohio
this 3rd day of November, A.D. 2020.*

Frank J. Rose

Ohio Secretary of State

Validation Number: 202030801046