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

From:
Account Name : BARKER WILLIAMS, PLLC
Account Number : I20170000030
Phone : (850)308-7033
Fax Number : (850)308-7115

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

Email Address: mruggle@bk-fl.com

**Foreign Limited Liability Company
Consolidated Restaurant Group, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	05
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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Consolidated Restaurant Group, 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:

Farrar J. Barker

Name of Person

Barker Williams, PLLC

Firm/Company

60 Clayton Lane

Address

Santa Rosa Beach, FL 32459

City/State and Zip Code

mriggle@bk-fl.com

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

For further information concerning this matter, please call:

Farrar J. Barker

850

308-7033

Name of Contact Person

at (_____) _____

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

**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. Consolidated Restaurant Group, 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. Delaware 3. _____
(Jurisdiction under the law of which foreign limited liability company is organized) (FBI 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)

5. 4477 Legendary Drive 6. 4477 Legendary Drive
(Street Address of Principal Office) (Mailing Address)

Suite 1 Suite 1
Destin, Florida 32541 Destin, Florida 32541

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

Name: Barker Williams, PLLC
Office Address: 60 Clayton Lane
Santa Rosa Beach, Florida 32459
(City) (Zip code)

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SECRETARY OF STATE
TALLAHASSEE, FL

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.

Farrax J. Barker

(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: Edward Stutz

☐ Member Address: 4477 Legendary Drive

☐ Authorized Suite 1

Person Destin, Florida 32541

☒ Other President, CEO ☒ Other Managing Director

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

☐ Manager Name: Michael Riggle

☐ Member Address: 4477 Legendary Drive

☐ Authorized Suite 1

Person Destin, Florida 32541

☒ Other CFO ☐ Other

☐ Manager Name: Kevin G. Delaplane

☐ Member Address: 4477 Legendary Drive

☐ Authorized Suite 1

Person Destin, Florida 32541

☒ Other Vice President ☐ Other

☐ Manager Name: William S. Ogden, Jr.

☐ Member Address: 4477 Legendary Drive

☐ Authorized Suite 1

Person Destin, Florida 32541

☒ Other Secretary ☐ Other

☐ Manager Name: Chad Clark

☐ Member Address: 4477 Legendary Drive

☐ Authorized Suite 1

Person Destin, Florida 32541

☒ Other Asst. Secretary ☐ 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.

DocuSigned by

 Signature of an authorized person

Michael Riggle, Authorized Representative

Typed or printed name of signer

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CONSOLIDATED RESTAURANT GROUP, 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 FIFTH DAY OF OCTOBER, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CONSOLIDATED RESTAURANT GROUP, LLC" WAS FORMED ON THE FIRST DAY OF APRIL, A.D. 2021.

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



5778033 8300

SR# 20213433016

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Authentication: 204331501

Date: 10-05-21