

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000007938

**Entity Name:** WEN SOUTH, LLC

**Current Principal Place of Business:**

45 OTTAWA AVENUE SW  
SUITE 600  
GRAND RAPIDS, MI 49503

**Current Mailing Address:**

45 OTTAWA AVENUE SW  
SUITE 600  
GRAND RAPIDS, MI 49503 US

**FEI Number:** 80-0351229

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGRM  
Name MHG FOOD SERVICE INC.  
Address 45 OTTAWA AVENUE SW  
SUITE 600  
City-State-Zip: GRAND RAPIDS MI 49503

Title AUTHORIZED REPRESENTATIVE  
Name SCHERMER, JR., ROBERT E.  
Address 45 OTTAWA AVE SW  
SUITE 600  
City-State-Zip: GRAND RAPIDS MI 49503

Title AUTHORIZED REPRESENTATIVE  
Name ROSE, GARY A  
Address 45 OTTAWA AVENUE SOUTHWEST  
SUITE 600  
City-State-Zip: GRAND RAPIDS MI 49503

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ROBERT E. SCHERMER, JR.

**AUTHORIZED  
REPRESENTATIVE**

**01/16/2024**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date