2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 15, 2024
Secretary of State
8240414242CC

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Entity Name: A3 RESTAURANT HOLDINGS, LLC

Current Principal Place of Business:

17895 COLLINS AVENUE
SUNNY ISLE BEACH, FL 33160

Current Mailing Address:

17895 COLLINS AVENUE
SUNNY ISLES BEACH, FL 33160 US

FEI Number: 81-5430862

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	MGR
Name	TG CO MANAGEMENT, INC.
Address	17895 COLLINS AVENUE
City-State-Zip:	SUNNY ISLES BEACH FL 33160

Title	CONTROLLER
Name	GARCIA, JAIR
Address	17895 COLLINS AVENUE
City-State-Zip:	SUNNY ISLES BEACH FL 33160

Title	EVP, SEC, GC
Name	HIRSCH, MARK
Address	17895 COLLINS AVENUE
City-State-Zip:	SUNNY ISLES BEACH FL 33160

Title	AUTHORIZED MEMBER
Name	TGD HOLDINGS I, LLC
Address	17895 COLLINS AVENUE
City-State-Zip:	SUNNY ISLE BEACH FL 33160

Title	CFO, SRVP
Name	SHMUELI, OREN
Address	17895 COLLINS AVENUE
City-State-Zip:	SUNNY ISLES BEACH FL 33160

Title	TREASURER, A-SEC
Name	GARCIA, ANDRES
Address	17895COLLINS AVENUE
City-State-Zip:	SUNNY ISLES BEACH FL 33160

Title	ASSOC. GENERAL COUNSEL, ASST SCE
Name	CAMPOS, JERRY
Address	17895 COLLINS AVENUE
City-State-Zip:	SUNNY ISLES BEACH FL 33160

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: ANDRES GARCIA TREASURER 04/15/2024

Electronic Signature of Signing Authorized Person(s) Detail — Date