F12000001579

(Requestor's Name)			
(Address)			
(Address)			
((datess)			
(City/State/Zip/Phone #)			
, i i i			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
J. HORNE			
JUL 2 3 2025			

Office Use Only



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CHILL



To: Department Of State, Division Of Corporations

From: Shauna Godbolt

Ext: x61563
Date: 07/22/25
Order #: 4141531-6
Re: Curation Foods, Inc.
Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Application for Certificate of Withdrawal Amount to be deducted from our State Account: \$35.0 - FL State Account Number: 12000000195

Please take the following action: File in your office on basis

Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA

Curation Foods, Inc.

		59
	(Name of Corporation	i)
t 1200000	570	
F12000001		. 12
	(Document Number of Corporation	on (if known)
DE		
		<u> </u>
(Inc	orporated Under Laws of and date authorized to tran	sact business/conduct its affairs)
	no longer transacting business or conducting ers its authority to transact business or conducting	g affairs within the State of Florida and hereby et affairs in Florida.
appoints the Depart		in Florida to accept service on its behalf and ss based on a cause of action arising during the lorida.
The following is a	current mailing address for the corporation:	
3515 Lyma	m Blvd	
	(Mailing Address)	
Chaska, M	N 55318	
	(City/ State /Zip)	
The corporation ag	rees to notify the Department of State in the f	uture of any change in its mailing address.
Ad	eron Perlitah	7/21/25
(Signature of a	director, president or other officer - if in the hands of a ner court appointed fiduciary, by that fiduciary)	(Date)
	on Perlitsh	Compliance Officer
(Typed	or printed name of person signing)	(Title of person signing)

FILING FEE \$35

WD-408624