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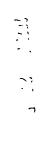
(Requestor's Name)						
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PICK-UP WAIT MAIL						
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(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
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COVER LETTER

TO:	_	tration Section on of Corporations	i.				
SUBJ	ECT:	Cava Selections, Inc	: .				
				ation - m	ust include suffix		
Dear S	ir or Ma	adam:					
"Certif	icate of	'Application by Fo 'Existence," or "Co ed foreign corpora	ertificate of Good	Standing	horization to Transa y" and check are su n Florida.	act Business in Flor bmitted to register	rida," the
Please	return a	ill correspondence	concerning this m	atter to t	he following:		
Bradle	y Berkm	an, Esq.					
			Name	of Pers	on		
Greens	poon Ma	arder, LLP					
· · · · · · · · · · · · · · · · · · ·			Firm/	Compan	y		
600 Bri	ickell Av	enue, 36th Floor					
		·	A	ddress			
Miami,	FL 3313	31					
	<u> </u>		City/Sta	te and Z	ip code		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
brad.be	rkman@	gmlaw.com					٠,٠
		E-mail	address: (to be us	ed for fi	iture annual report	notification)	
For fur	ther info	ormation concerning	g this matter, plea	se call:			<u></u>
Bradley	Berkma	of Person	at (305	/	89-2770		
	ivame	of Person	Area (Lode	Daytime Telep	hone Number	
	Registr Division The Ce 2415 N	et/Courier Air ration Section on of Corporations entre of Tallahassee I. Monroe Street, S assee, FL 32303	;		MAILING A Registration S Division of Co P.O. Box 632 Tallahassee, F	Section orporations 7	
lease n		~		□ \$78	STATE 2.75 Filing Fee & ctified Copy	S87.50 Filing Certificate o Certified Co	f Status &

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

	lable in Florida, enter alternate corpora	te name adopted for the purpose of transacting l	business in Florida)	
Delaware 3. 92-09996121 (State or country under the law of which it is incorporated) (FEI number, if applicable)				
	•		•	
08/09/2022 5		5. (Date of duration, if other tha	(Date of duration, if other than perpetual)	
	(SEE SECTIONS 607.1501 &	isiness in Florida, if prior to registration) & 607.1502, F.S., to determine penalty liability)	;	
222	Lakeview Ave.	LLC, West Palm?	Beach Fl 3	
	(Сигтег	nt mailing address, if different)		
Name and stre	et address of Florida registered ager	nt: (P.O. Box <u>NOT</u> acceptable)	m 3 - 3	
Name and stre	et address of Florida registered ager Louis J. Terminello, Esq.	nt: (P.O. Box <u>NOT</u> acceptable)		
Name:		nt: (P.O. Box <u>NOT</u> acceptable)		
Name:	Louis J. Terminello, Esq. 600 Brickell Avenue, 36th Floor Miami	, Florida <u>33131</u>	50 P.	
Name:	Louis J. Terminello, Esq. 600 Brickell Avenue, 36th Floor	·		
Name: Office Address: Registered ag laving been nan esignated in this arther agree to c	Louis J. Terminello, Esq. 600 Brickell Avenue, 36th Floor Miami (City) ent's acceptance: and as registered agent and to accept application, I hereby accept the application.	, Florida 33131 (Zip code) pt service of process for the above stated compointment as registered agent and agree to the proper and complete p	o act in this capacit	
Name: Office Address: Registered aglaving been namesignated in this	Louis J. Terminello, Esq. 600 Brickell Avenue, 36th Floor Miami (City) ent's acceptance: ned as registered agent and to accept application, I hereby accept the appropriate the provisions of all states.	, Florida 33131 (Zip code) pt service of process for the above stated compointment as registered agent and agree to the proper and complete p	orporation at the pla to act in this capacit	

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

A. DIRECTORS

□Chairman	Name: Andres Zinelis	Chairman	Name:	
□ Vice Chairman	Address: 201 Bedell Avenue	Uice Chairman		
□Director	Hempstead, NY 11550	□Director		
President	-	□President		
□Vice President		Uvice President		
☐ Secretary	□Treasurer	□ Secretary		∐Treasurer
Other	Other	Other		Other
□ Chairman	Name:	(□Chairman	Name:	
□Vice Chairman	Address:	Vice Chairman	Address:	
□Director		Director	· 	
□President		☐ President		
□Vice President		□Vice President		
Secretary	□Treasurer	☐ Secretary		□Treasurer
Other	Other	Other		□Other
□Chairman	Name:	Chairman	Name:	
□Vice Chairmaπ	Address:	Vice Chairman	Address:	~;
□Director		Director		
□President		President		
□Vice President		□ Vice President		
[]Secretary	Treasurer	☐ Secretary		□Treaşurer
[]Other		Other	<u>.</u>	□Other
Important Notice: Undividuals may be	ise an attachment to report more than six (6). added to the index when falling your Florida I	Department of State Annual Dec	sart farm	
The officer or directions is aware that fall	tor signing this document (and who is listed i se information submitted in a document to th	n number 11 above) affirms tha	t the facts state	d herein are true and that he or

s.817.155, F.S.

13. Andreas Zilenis



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "CAVA SELECTIONS INC." IS DULY

INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS

OF THIS OFFICE SHOW, AS OF THE TWENTY-FIRST DAY OF FEBRUARY, A.D.

2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CAVA SELECTIONS INC." WAS INCORPORATED ON THE NINTH DAY OF AUGUST, A.D. 2022.

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

Authentication: 202753430

Date: 02-21-23

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