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## **COVER LETTER**

	stration Section sion of Corporations						
SUBJECT:	EVRY JEWELS INCORPORA	TED					
Name of corporation - must include suffix							
Dear Sir or N	Madam:						
"Certificate of	I "Application by Foreign Corp of Existence," or "Certificate of need foreign corporation to tran	Good Stand	ding" and check are submitte				
Please return	all correspondence concerning	this matter	to the following:				
JASON KAT	Z						
<del></del> -		Name of I	Person				
EVRY JEWE	LS INCORPORATED						
		Firm/Com	pany				
19575 BISCA	YNE BLVD. #1344						
		Addre	ess				
AVENTURA,	FLORIDA 33180						
		City/State ar	nd Zip code				
JKATZ@EVF	RYJEWELS.COM						
	E-mail address: (	to be used f	or future annual report notific	cation) .			
For further in	nformation concerning this mat	ter, please c	all:				
JASON KATZ	ON KATZ at (514 577-9477						
Nam	ne of Person	Area Code	_/	Number			
Regi Divis The ( 2415	EET/COURIER ADDRESS: stration Section sion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 thassee, FL 32303		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassec, FL 32314				
	t check for the following amount heck payable to: FLORIDA DEP ling Fee	ARTMENT		\$87.50 Filing Fee, Certificate of Status & Certified Copy			

## 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.

"Inc.," "Co.,* "Co	orporation; must include "INCORPORATED," orp," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATIO	N,"	
(If name unavails	able in Florida, enter alternate corporate name ad	opted for the purpose of transactir	ng business in Florida)	
DELAWARE		99-118225/		
State or country under the law of which it is incorporated)		(FEI number, if applicable)		
IANHARY 18.2				
(Date of incorporation) 5.		(Date of duration, if other than perpetual)		
MARCH 01,202				
19575 BISCAYN	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.150)		ity)	
	(Principal office	street address)		
	(i molpul omoc	SEFEE AGAILESS)		
	(Current mailing	address, if different)		
Name and street	Agents and Corporations, Inc.	Box <u>NOT</u> acceptable)	207	
	\$20 5th Avanua C Cuita 220			
ffice Address:	539 5th Avenue S Suite 330	<del></del>	I , IK	
office Address:		, Florida <u>34102</u>	HAY!	
ffice Address:		, Florida 34102 (Zip code)	DOZEMAY 14	
. Registered ago laving been nam lesignated in this	Naples  (City)  ent's acceptance:  ed as registered agent and to accept service application, I hereby accept the appointme	e of process for the above states ant as registered agent and agr	d corporation arthe peet to act in this capac	
. Registered ago laving been nam lesignated in this urther agree to co	Naples (City) ent's acceptance: ed as registered agent and to accept service	e of process for the above state ont us registered agent and agr ative to the proper and comple	d corporation arthe peet to act in this capac	
Having been nam lesignated in this lurther agree to c	Naples  (City)  ent's acceptance:  ed as registered agent and to accept service application, I hereby accept the appointme omply with the provisions of all statutes rel	e of process for the above states that as registered agent and agrative to the proper and completion as registered agent.  The source of the proper and completion as registered agent.	d corporation arthe peet to act in this capac	

under the law of which it is incorporated.

the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction

<sup>11.</sup> For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS							
Chairman	Name:	□ Chairman	Name:				
☐ Vice Chairman	95 HYMUS BLVD Address:	□Vice Chairman	Address:				
Director	POINTE CLAIRE, QUEBEC	Director					
□President	CANADA H9R 1E2	President					
□Vice President		□Vice President		<del></del>			
☐ Secretary	□Treasurer	Secretary		□Treasurer			
□Other	Other	□Other		Other			
□ Chairman	JASON KATZ		Name				
□Vice Chairman	95 HYMUS BLVD.	□ Vice Chairman					
Director	POINTE CLAIRE, QUEBEC	Director					
□ President	CANADA H9R 1E2	□President					
□Vice President		□Vice President					
Secretary	□Treasurer	Secretary		□Treasurer			
■Other	Other	□Other		□ Other			
□ Chairman	Name:	□Chairman	Name:				
□Vice Chairman	Address:	□ Vice Chairman					
□Director		Director					
□President		□President					
□ Vice President		□Vice President					
☐ Secretary	Treasurer	Secretary		□Treasurer			
□Other		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 thing your Florian Department of State Annual Report form.  12.  Signature of Director or Officer  The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that 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. 13. JASON KAT			_				
13.	(Tread as it is described as it is a		<del>-</del>				

Page 1

## Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "EVRY JEWELS INCORPORATED" 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 MARCH, A.D.

2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "EVRY JEWELS INCORPORATED" WAS INCORPORATED ON THE EIGHTEENTH DAY OF JANUARY, A.D. 2024.

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

Authentication: 203076306

Date: 03-21-24

2955922 8300 SR# 20241101075

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