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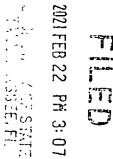
(не	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
	TO PREMI	
(80	siness Entity Nam	le)
(Do	cument Number)	
Certified Copies	Certificates	of Status
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Special Instructions to	Filing Officer:	

Office Use Only



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## COVER LETTER

TO:	Registration Section Division of Corporations					
SHRI	JECT: DINERAZO INC.					
3000		ne of corporation	- must include suffix			
Dear S	Sir or Madam:					
"Certi	nclosed "Application by Foreign ficate of Existence," or "Certificate referenced foreign corporation to	ate of Good Stand	ling" and check are subr			
Please	return all correspondence conce	rning this matter	to the following:		~3	
ANTO	NIO REGOJO			* * · · · ·	<u> </u>	-
		Name of P	Person		TE S	-
REGO	JO LAW, PA			· <del>.</del>	22	مصر
		Firm/Comp	pany	f av	P	
12550	BISCAYNE BLVD STE 110			₩.o.	PK 3:	
		Addres	SS	四三	3	
MIAN	II, FL 33181			77:		
		City/State an	d Zip code	<del> </del>		
aregoj	o@regojolaw.com					
	E-mail addr	ess: (to be used fo	or future annual report n	otification)		
For fu	rther information concerning this	s matter, please ca	all:			
ANTO	NIO REGOJO	305	814-8299			
	Name of Person	Area Code	Daytime Teleph	none Number	-	
	STREET/COURIER ADDR. Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 8 Tallahassee, FL 32303		MAILING AI Registration Se Division of Co P.O. Box 6327 Tallahassee. F	ection orporations		
Please	sed is a check for the following a make check payable to: FLORIDA 0.00 Filing Fee	DEPARTMENT	OF STATE \$78.75 Filing Fee & Certified Copy	\$87.50 Filin Certificate of Certified Co	of Status &	Ŀ

## 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.

1			
(Enter name of co	orporation; must include "INCORPORAT" orp.," "Inc.," "Co.," or "Corp.")	ED," "COMPANY," "CORPORATION,"	
(If name unavaila	able in Florida, enter alternate corporate na	ame adopted for the purpose of transacting b	usiness in Florida)
2. DELAWARE	·	, 86-1193452	
(State or country	y under the law of which it is incorporated	3. (FEI number, if applie	cable)
4. 01/01/2021			
	of incorporation)	5. (Date of duration, if other than	perpetual)
6. N/A			
		ess in Florida, if prior to registration) 07.1502, F.S., to determine penalty liability)	2021
7 12550 BISCAYN	E BLVD STE 110, MIAMI, FL 33181		
-	(Principal	office street address)	22
12550 BISCAYN	E BLVD STE 110, MIAMI, FL 33181		
	(Current m	railing address, if different)	
Name and stree	et address of Florida registered agent:	(P.O. Box NOT acceptable)	3: 07 5: F. F.
Name:	ANTONIO REGOJO		
Office Address:	12550 BISCAYNE BLVD STE 110		
	MIAMI	, Florida 33181 (Zip code)	
	(City)	(Zip code)	
designated in this further agree to c	ed as registered agent and to accept s application, I hereby accept the appo	vervice of process for the above stated continuent as registered agent and agree the relative to the proper and complete pay position as registered agent.	o act in this capacity. I

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: ISRAEL HERNANDEZ	□Chairman	Name: AARON CHAVEZ		
□Vice Chairman	Address:	□Vice Chairman	Address:		
Director	STE   10	Director	STE 110		
President	MIAMI, FL 33181	□President	MIAMI, FL 33181		
□Vice President		□Vice President			
□Secretary	□Treasurer	☐ Secretary	Treasurer		
□Other	Other	□Other	Other		
□Chairman □Vice Chairman	Name: ANTONIO REGOJO  Name: 12550 BISCAYNE BLVD  Address: STE 110	□Chairman	ALEX MCELFISH Name:		
Director		Director			
□President	MIAMI, FL 33181	□President	MIAMI, FL 33181 22		
□Vice President		□Vice President	FEB 22		
Secretary	Treasurer	☐ Secretary	र □Treasurer चित्र		
□Other	Other	□Other			
			O7		
☐ 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		
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 filing your Florida 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.

ANTONIO REGOJO, DIRECTOR



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

DELAWARE, DO HEREBY CERTIFY "DINERAZO INC." IS DULY INCORPORATED

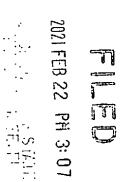
UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE TWENTY-NINTH DAY OF JANUARY, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "DINERAZO INC."

WAS INCORPORATED ON THE FIRST DAY OF JANUARY, A.D. 2021.





Authentication: 202405604

Date: 01-29-21