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2022 APR -8 PH 7: 52

S. FRANKLIN APR 2 0 2022

COVER LETTER

	stration Section ion of Corporations				
SUBJECT:	Benuvia Management Inc.				
SOME CE	Namo	of corporation	- must include suffix	<u></u>	
Dear Sir or M	ladam:				
"Certificate o	"Application by Foreign C f Existence," or "Certificat ced foreign corporation to	e of Good Star	iding" and check are sub		
Please return	all correspondence concer	ning this matter	to the following:		
Yaakov Klein					
		Name of	Person		- 25
Frankel, Rubir	Frankel, Rubin, Klein, Payne & Pudłowski, P.C.			2022 NPR	
		Firm/Con	npany	-	PR
231 S. Bemisto	on, Suite 1111				
		Addr	ess		-8 PH
Clayton, MO 6	53105		= -		7: 52
11:00		City/State a	nd Zip code	, -	52
yklein@franke		ee: (10 be used)	for future annual report n	otification)	
For further in	formation concerning this:		·	omreamon)	
101 10111101 111	iormation concerning units	matter, prease c			
Yaakov Klein		at (725-8000 x141		
Nam	e of Person	Area Cod	e Daytime Telepl	none Number	
Regis Divis The C 2415	STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		ection orporations 7		
	check for the following an leck payable to: FLORIDA I ling Fee	DEPARTMENT ng Fee &	**OF STATE 3 \$78.75 Filing Fee & Certified Copy	□ \$87.50 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.

	orp," "Inc," "Co." or "Corp.")			
	·	dopted for the purpose of transacting business in Flori	ida)	
Delaware, USA	3.	85-3979478 (FEI number, if applicable)		
(State or countr	y under the law of which it is incorporated)	(FEI number, if applicable)		
1/15/2021	5			
(Date	Date of incorporation) 5. (Date of duration, if other than perp		_	
4/1/2022				
110 Front Street	·	2, F.S., to determine penalty liability)		
110 Front Street,	Suite 300, Jupiter, FL 33477	e <u>street</u> address)	 2	
110 Front Street,	Suite 300, Jupiter, FL 33477 (Principal office)	e <u>street</u> address)	2022 APR	
	Suite 300, Jupiter, FL 33477 (Principal office)	e <u>street</u> address)	2027 APR -8 F	
	Suite 300, Jupiter, FL 33477 (Principal office) (Current mailing)	e <u>street</u> address)	2022 APR -8 PN 7	
. Name and <u>stree</u>	Suite 300, Jupiter, FL 33477 (Principal offic (Current mailing et address of Florida registered agent: (P.O.)	e <u>street</u> address)	2027 APR -8 PH 7: US	
. Name and <u>stree</u> Name:	(Principal office (Current mailing et address of Florida registered agent: (P.O InCorp Services, Inc.	e <u>street</u> address)	2027 APR -8 PH 7: US	

9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Jackie DeFilippis on behalf of InCorp Services, Inc

(Registered agent's signature)

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:	□Chairman	Name:	
□Vice Chairman	Address:	□Vice Chairman	Address:	
■Director	Jupiter, FL 33477	□Director		
□President		□President		
□Vice President		□Vice 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		<u>.</u>
□Secretary	□Treasurer	☐ Secretary		□Treasurer
Other		□Other		□Other
	Name:	□Chairman □Vice Chairman		P
□Director		□Director	<u></u>	
□President		□President		
□Vice President		□ Vice President		
□Secretary	□Treasurer	☐ Secretary		□Treasurer
□Other	□ Other	□Other		□Other
individuals may be	Use an attachment to report more than six (6). The attachment to the index when filing your Florida Department of Director of Signature of Director of	ent of State Annual Re	eport form.	ourposes only. Non-indexed

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.

, Todd Davis, Director

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BENUVIA MANAGEMENT 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 FIRST DAY OF APRIL, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BENUVIA MANAGEMENT INC." WAS INCORPORATED ON THE FIFTEENTH DAY OF JANUARY, A.D. 2021.

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

4759832 8300 SR# 20221270373

Authentication: 203075079

Date: 04-01-22