

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (954)208-0845
Fax Number : (614)573-3996

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2022 MAY 24 AM 10:53
SECRETARY OF STATE
TALLAHASSEE, FL

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

FOREIGN PROFIT/NONPROFIT CORPORATION
NUMBER 1 BEST COMPANY, inc.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

Requesting the original filing date of 5/24/22.
Thank you!

Page: 1 of 1
2022-05-10 10:47:17 AM EDT

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. Number 1 Best Company, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Delaware 3. 86-3927448
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 03/16/2022 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)

6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 643 Jefferson Ave #1, Miami Beach, FL 33139
(Principal office street address)

301 NW 71st St, Miami, FL 33150
(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

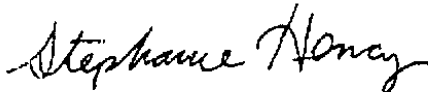
Name: C T Corporation System

Office Address: 1200 S Pine Island Rd

Plantation, Florida 33324
(City) (Zip code)

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.



(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.

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

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A. DIRECTORS

☐ Chairman Name: Meghan Browning

☐ Vice Chairman Address: 643 Jefferson Ave #11

☒ Director Miami Beach, FL 33139

☐ President _____

☐ Vice President _____

☐ Secretary ☐ Treasurer

☒ Other Chief Executive Officer ☐ Other _____

☐ Chairman Name: Alexander Ferzan

☐ Vice Chairman Address: 643 Jefferson Ave #11

☒ Director Miami Beach, FL 33139

☒ President _____

☐ Vice President _____

☐ Secretary ☐ Treasurer

☒ Other Chief Marketing Officer ☐ Other _____

☐ Chairman Name: _____

☐ Vice Chairman Address: _____

☐ Director _____

☐ President _____

☐ Vice President _____

☐ Secretary ☐ Treasurer

☐ Other _____ ☐ Other _____

☐ Chairman Name: Surinder Singh

☐ Vice Chairman Address: 402 Sterling Pl

☒ Director Brooklyn, NY 11238

☐ President _____

☐ Vice President _____

☒ Secretary ☒ Treasurer

☒ Other Chief Financial Officer ☐ Other _____

☐ Chairman Name: Zachary Ferzan

☐ Vice Chairman Address: 645 NE 77th St #2

☒ Director Miami, FL 33138

☐ President _____

☐ Vice President _____

☐ Secretary ☐ Treasurer

☒ Other Vice President of Operations ☐ Other _____

☐ Chairman Name: _____

☐ Vice Chairman Address: _____

☐ Director _____

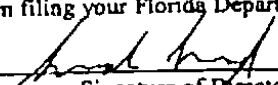
☐ President _____

☐ Vice President _____

☐ Secretary ☐ Treasurer

☐ 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.

13. Surinder Singh (Chief Financial Officer, Secretary and Treasurer)
(Typed or printed name and capacity of person signing application)

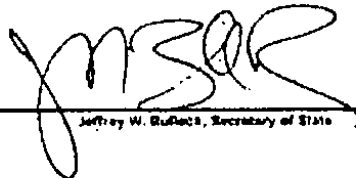
Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "NUMBER 1 BEST COMPANY, 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-FOURTH DAY OF MAY, A.D. 2022.

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


Jeffrey W. Bullock, Secretary of State

5925406 8300

SR# 20222259912

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

Authentication: 203506883

Date: 05-24-22