## F22-00003808

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S. FRANKLIN
JUN 1 8 2022

## **COVER LETTER**

	tegistration Section Section   Division of Corporate						
SUBJEC	MENUSIFU	J, INC.					
OODATE	~ <del></del>	Name of cor	ooration -	must include suffix			
Dear Sir	or Madam:						
"Certifica	ite of Existence,'		od Standi	ng" and check are sub	ct Business in Florida," mitted to register the		
Please re	turn all correspor	ndence concerning thi	s matter to	the following:			
Corey Bra	ıy						
-		N	ame of Pe	erson	202		
LegalNati	ire LLC				2022 13/1 31		
		Fi	rm/Comp	any	<i>ب</i>		
8 The Gre	en Suite 4336				- 71		
			Addres	3	<u> </u>		
Dover, DI	E 19901				. 2		
	···	City	/State and	Zip code			
accountin	g@menusifu.com						
		E-mail address: (to b	e used for	future annual report r	otification)		
For furthe	er information co	ncerning this matter,	please cai	l:			
Corey Bra	ıy	at (	38	881-1139			
ì	Name of Person	A	ea Code	Daytime Telep	hone Number		
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				Registration S Division of Co P.O. Box 632	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
Please mal	ke check payable t	e following amount: b: FLORIDA DEPAR  \$78.75 Filing Fee Certificate of Stat	& 🗆 :	OF STATE \$78.75 Filing Fee & Certified Copy	S87.50 Filing Fee, Certificate of Status & Certified Copy		

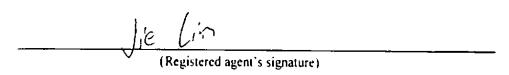
## BUSINESS IN FLORIDA

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.

(If name unavail	able in Florida, enter alternate corporate name ad	opted for the purpose of transacti	ng business in Florida)	
Delaware	·			
(State or country under the law of which it is incorporated) 2/17/2015 5.		(FEI number, if applicable)		
(Date	of incorporation)	(Date of duration, if other than perpetual)		
462 N Terry Ave	(SEE SECTIONS 607.1501 & 607.1502 Apt#1220, Orlando, Forida 32801	2, F.S., to determine penalty liabil	lity)	
462 N Terry Ave	(SEE SECTIONS 607.1501 & 607.1502 Apt#1220, Orlando, Forida 32801 (Principal office		ity)	
462 N Terry Ave	Apt#1220, Orlando, Forida 32801 (Principal office			
	Apt#1220, Orlando, Forida 32801  (Principal office  (Current mailing a set address of Florida registered agent: (P.O.)	street address) address, if different)		
	Apt#1220, Orlando, Forida 32801  (Principal office  (Current mailing a	street address) address, if different)	2022 HAY 3 I	
Name and stree	Apt#1220, Orlando, Forida 32801  (Principal office  (Current mailing a set address of Florida registered agent: (P.O.)	street address) address, if different)	2022 HAY 31 PH	
Name and stree	Apt#1220, Orlando, Forida 3280)  (Principal office  (Current mailing a set address of Florida registered agent: (P.O. Jie Lin	street address) address, if different)	2022 HAY 3 I	

## 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.



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	F.,				
Chairman	Name:	□ Chairman	Name:		
□Vice Chairman	Address: 23 Jefferson Rd	□Vice Chairman	Address:		
Director	Princeton, NJ 08540	□Director			
President		□ 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	DOther	Other		Other	
				·	
□ Chairman	Name:	□ Chairman	Name:	2022 146	
□Vice Chairman	Address:	□Vice Chairman	Address:	<u>ω</u>	
□Director		Director		PH	
□President		□President	<del>-</del>	2	
□Vice President		□Vice President			
Secretary	☐Treasurer	Secretary		☐Treasurer	
Other	Other	Other		□ Other	
12.	se an attachment to report more than six (6). The added to the index when filing your Florida Department of Direct Signature of Direct	ttor or Officer	ort form.		
s.817.155, F.S.	or signing this document (and who is listed in nu te information submitted in a document to the Do	imber 11 above) affirms that epartment of State constitute	t the facts states a third degr	ted herein are true and that he or ree felony as provided for in	
13 Yu Li, Preside	ent				



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

DELAWARE, DO HEREBY CERTIFY "MENUSIFU, 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-SIXTH 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 "MENUSIFU, INC."

WAS INCORPORATED ON THE SEVENTEENTH DAY OF FEBRUARY, A.D. 2015.

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

2022 MAY 31 PH 5: 21



Authentication: 203274623

Date: 04-26-22

5695868 8300 SR# 20221637134