## F22000003965

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer.					
·					

Office Use Only



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2022 JUN 23 AM II: 23

RECEIVED

S. FRANKLIN
JUN 2 4 Zu.

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallbassee FL 32301

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195							
REFERENCE : 742799 8249139							
AUTHORIZATION: Spullideran							
AUTHORIZATION: Spellidera 3 COST LIMIT: \$70.00							
ORDER DATE: June 14, 2022  ORDER TIME: 8:05 AM							
ORDER TIME: 8:05 AM							
ORDER NO. : 742799-005							
CUSTOMER NO: 8249139							
NAME: SELINA RY HOLDING INC.							
XXXX QUALIFICATION (TYPE: CO)							
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:							
CERTIFIED COPY  XX PLAIN STAMPED COPY  CERTIFICATE OF GOOD STANDING							
CONTACT PERSON: Eyliena Baker EXT#							

EXAMINER:

## **COVER LETTER**

TO:	_	tration Section on Corporations				
SUBJ	ECT:	SELINA RY HOLDING IN	SC.			
15 0 150	-, -, -,	Name of corporation - must include suffix				
Dear S	ir or M	adam:				
"Certif	icate of	"Application by Foreign Of Existence." or "Certifica ced foreign corporation to	te of Good Stand	ding" and check are sub		
Please	return a	all correspondence concer	ning this matter	to the following:		
Alexan	dra Call					
			Name of I	Person	2022 JUN 23	
Selina					(, 	
			Firm/Com	pany	23	
437 SV	V 2 Stre	et			P	
			Addre	SS		
Miami.	FL 331	30			<u>.</u>	
			City/State ar	nd Zip code		
alexano	irac@se	lina.com				
		E-mail addre	ss: (to be used for	or future annual report i	notification)	
For fur	ther int	ormation concerning this	matter, please ca	all:		
Alejandra Vargas		954 at (	512-3298	512-3298		
	Name of Person		Area Code	Daytime Telephone Number		
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		
	nake ch	check for the following an eck payable to: FLORIDA I ng Fee	DEPARTMENT ng Fee & 🗆	OF STATE \$78.75 Filing Fee & Certified Copy	<ul> <li>\$87.50 Filing Fec,</li> <li>Certificate of Status &amp;</li> <li>Certified Copy</li> </ul>	

## 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. SELINA RY HO							
	orporation; must include "INCORPORATED." orp," "Inc," "Co," or "Corp.")	"COMPANY." "CORPORATION."					
RY HOLDING	INC.						
(If name unavails	f name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)						
DELAWARE	3. E	(FEI number, if applicable)					
	y under the law of which it is incorporated)	(FEI number, if applicable)					
01.JUNE.2018							
(Date	of incorporation)	(Date of duration, if other than perpetual)					
5							
	(Date first transacted business in I (SEE SECTIONS 607.1501 & 607.150		70				
7. 518 West 27th St	New York, NY 10001		122				
	(Principal office	street address)	ا ، ا المارة المارة				
437 SW 2 Street,	, Miami, FL 33130		23				
	(Current mailing	address, if different)	P				
8. Name and stree	et address of Florida registered agent: (P.O.	Box NOT acceptable)	7022 JUH 23 PH 4: 07				
Name:	Corporation Service Company	<del></del>	21				
Office Address:	1201 Hays Street	_ <del></del>					
	Tallahassee	Florida 32301 (Zip code)					
	(City)	(Zip code)					
Having been nam designated in this further agree to co	ent's acceptance:  eed as registered agent and to accept service application, I hereby accept the appointme omply with the provisions of all statutes rela with and accept the obligations of my posit	nt as registered agent and agree to act in ative to the proper and complete perform	this capacity. I				
C	orporation Service Company						
<u>B</u>	y allexus Weiterd assistant	vapresident					
	(Registered agent's sign	nature)					

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

under the law of which it is incorporated.

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

## A. DIRECTORS William Warren Gassenheimer Shaun Kenneth Prime □ Chairman □ Chairman Name: Name: 5800 Ellsworth Avenue Flat 4 Da Vinci House Address: □ Vice Chairman Address: ☐ Vice Chairman 4 Saffron Hill, London, EC1N 8FH Dallas, Texas 75206. ■ Director ■ Director President □President □Vice President □Vice President \_\_\_\_\_\_ **■**Treasurer □Treasurer □ Secretary Secretary Other Other \_\_\_\_\_ Other \_\_\_ Name: \_\_\_\_\_ Name: \_\_\_\_\_\_\_\_\_\_ □ Chairman □Chairman □ Vice Chairman Address: \_\_\_ \_\_ □ Vice Chairman Address: □ Director □ Director □ President □ President □ Vice President \_\_ ☐ Vice President □ Secretary □Treasurer □ Secretary □Treasurer □Other \_\_\_\_ Other \_\_\_ ☐Other \_\_\_ □Chairman □ Chairman Name: \_\_\_\_\_ □Vice Chairman Address: \_\_\_\_\_ □ Vice Chairman Address: \_\_ □ 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 filing your Florida Department of State Annual Report form. 12. William Warren Gassenheimer 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.

WILLIAM WARREN GASSENHEIMER - SECRETARY



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

DELAWARE, DO HEREBY CERTIFY "SELINA RY HOLDING 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 FOURTEENTH DAY OF JUNE, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SELINA RY HOLDING INC." WAS INCORPORATED ON THE FIRST DAY OF JUNE, A.D. 2018.

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

2022 JUH 23 PH 4: 67



Authentication: 203678538

Date: 06-14-22