

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





POT 2 0 2J22

CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 057314 7545742

AUTHORIZATION

COST LIMIT : ´\$`70.00

ORDER DATE: October 17, 2022

ORDER TIME : 9:34 AM

ORDER NO. : 057314-025

CUSTOMER NO: 7545742

FOREIGN FILINGS

NAME: WORLD FRESH PRODUCE INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland -- EXT#

EXAMINER:

COVER LETTER

	tration Section ion of Corporations				
SUBJECT:	WORLD FRESH PRODU	ICE, INC.			
SUBJECT	Nan	ne of corporation	- must include suffix		
Dear Sir or M	adam:				
"Certificate of	"Application by Foreign f Existence," or "Certificated foreign corporation to	ate of Good Stand	ling" and check are sub-		
Please return	all correspondence conce	ming this matter	to the following:		
Nancy A. Mau	rice, Esq.				
		Name of I	Person		
The Nilson La	w Group, PLLC				
		Firm/Com	pany	2012 6. 1. 19	
10 E 40th Stree	et, Suite 3310			376	
		Addre	 SS		
New York, Ne	w York 10016			61	
		City/State ar	nd Zip code	2	
paralegal@nils	onlaw.com	•	•	Ċ	
	E-mail addr	ess: (to be used for	or future annual report n	otification)	
For further in	formation concerning this	s matter, please co	all:		
Nancy A. Mau	nice	at (212	687-1155		
Name	e of Person	Area Code	: Daytime Telepl	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 6327	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
	-	DEPARTMENT	OF STATE \$78.75 Filing Fee & Certified Copy	S87.50 Filing Fee, Certificate of Status & Certified Copy	

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.

	corporation; must include "INCORPORATED," * Corp," "Inc," "Co," or "Corp.")		
(If name unavail	able in Florida, enter alternate corporate name ad	opted for the purpose of transacting bus	iness in Florida
New Jersey	3.		
(State or count	ry under the law of which it is incorporated)	(FEI number, if applicat	ole)
April 20, 2018	5.		
(Date	(Date of incorporation) (Date of duration, if other than per		erpetual)
September 21, 2	2020		
	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1502 IELD ROAD, #300, CHERRY HILL, NJ 08002	, 1.3., to determine penalty hadney)	<u> </u>
i/A	(Principal office	street address)	
	(Current mailing a	address, if different)	2012 (
			ر د
Name and <u>stre</u> e	et address of Florida registered agent: (P.O. 1	Box <u>NOT</u> acceptable)	
	et address of Florida registered agent: (P.O. l Corporation Service Company	Box <u>NOT</u> acceptable)	77
Name:		Box <u>NOT</u> acceptable)	
	Corporation Service Company 1201 Hays Street	Box NOT acceptable) , Florida 32301 (Zip code)	

ties, and I am familiar with and accept the obligations of my position as registered agent.

Corporation Service	ce Company	
By: Clexus	Weiland assistant va present	
	(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				
L_Chairman	Name: MICHEL MAATOUK	∐Chairman	Name:	
□Vice Chairman	Address: 923 HADDONFIELD ROAD	□Vice Chairman	Address:	
Director	#300	□Director		
■ President	CHERRY HILL, NJ 08002	l IPresident		
□ Vice President		□Vice Presidem		
■ Secretary	DTreasurer	☐ Secretary		□Treasurer
l 'Other	[Other	10ther		l Other
□Chairman □Vice Chairman ■Director	Name: SALVATORE LAVORATO Paddress: 923 HADDONFIELD ROAD #300	□Chairman □Vice Chairman □Director	Address:	
□President	CHERRY HILL, NJ 08002	□President		
□Vice President		□ Vice President		
□ Secretary	■Treasurer	Secretary		Treasurer 237
□Other		□Other		COther 2
				. 19
LChairman	Name:	LlChairman	Name:	5.2
□ Vice Chairman	Address:	□Vice Chairman	Address:	
□ Director		□Director		
1 President		l IPresident		
□Vice President		□Vice President		
□ Secretary	□Treasurer	□Secretary		□Treasurer
L.Other	{	HOther		L!Other
individuals may be	Use an attachment to report more than six (6). The attachment to the index when filing your Forida Department of Director of Signature of Director of	nt of State Annual Re	eport form.	
	tor signing this document (and who is listed in number lse information submitted in a document to the Depart			
13. Michel Maat	ouk, President			

STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES SHORT FORM STANDING

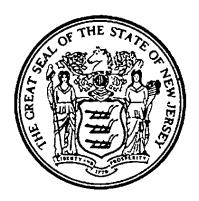
WORLD FRESH PRODUCE INC 0450262495

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic For-Profit Corporation was registered by this office on April 20, 2018.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and office are:

JOSEPH A. REPICE, SR,CPA 737 LANDIS AVENUE VINELAND, NJ 08360



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 18th day of October, 2022

Elizabeth Maher Muoio State Treasurer

Certificate Number: 6136802348

Verify this certificate online at

https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp