# MACOOSALA

| •                                       |  |  |  |  |
|---|--|--|--|--|
| . (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



400326958984

TILED TO THE

O HAD 27 PH 131 22

3/28/19 25

#### Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301 850.656.7956

Fax: 850.656.7953 www.Incserv.com

e-mail: accounting@incserv.com

## incserv<sup>®</sup>

#### ORDER FORM

TO Florida Department of State Division of Corporations, Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

corphelp@dos.myflorida.com

850-245-6051

FROM

Melissa Stops

mstops@incserv.com

850.656.7953

REQUEST DATE 3/27/2019

PRIORITY Routine OUR REF # (Order ID#)

**ORDER ENTITY** 

JUST SALAD FT. LAUDERDALE, LLC

#### PLEASE PERFORM THE FOLLOWING SERVICES:

JUST SALAD FT. LAUDERDALE, LLC (FL)

File the attached foreign qualification document

Retrieve Certified Copies of the following documents:

#### NOTES:

\$125.00 Authorized

Email address for annual report reminders: Lisa@delaneycorporate.com

#### **RETURN/FORWARDING INSTRUCTIONS:**

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Page 1 of 1 Wednesday, March 27, 2019

### APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605,0902, FLORIDA STATUTES, THE FULLDIVING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

| I. Just Salad Ft Lauderda  |  |   |   |
|--|--|---|---|
| (Name of For   | eign Limited Liability Company; must incl  | lude "Limited Liability Company," "L.L.C.," or  | 'LLC.")   |
| (If name unavailable, enter a<br>Liability Company," "L.L.C,   |  | runsacting business in Florida. The alternate nam   | e must include "Limited                             |
| 2. Delaware  |  | 83-4040385  |   |
| (Jurisdiction under the law company is organized)  | of which foreign limited liability   | (FEI number, if applicable)   |   |
| 4. Upon filing   |  | <u> </u>  |   |
|  | (Date first transacted business in (See sections 605.0904 & 605.0905   | Florida, if prior to registration.)<br>, F.S. to determine penalty liability)   |   |
| 5. 663 Lexington Avenue  | e, New York, NY 10022  |   |   |
|  |  |   |   |
|  | (Street Address of Princi  | nal Office)   | سُسُّم، الغُرِّ الغُرِّ                             |
| 6. 663 Lexington Avenue  | 2  |   |   |
| 0. <u> </u>  |  |   | J. J.   |
|  | 27-92  |   | المسا   |
|  | (Mailing Addre   | 55)   | ·   |
| <ol><li>Name and street addres</li></ol>   | s of Florida registered agent: (P.O. Be  | ox NOT acceptable)  | ; O   |
| Name:  | NRAI Services, Inc.  |   |   |
| Office Address:  | 1200 South Pinc Island Road  |   |   |
|  | Plantation   | , Florida <u>33324</u>  |   |
|  | (City)   | (Zip code)  |   |
| designated in this application complywith the provision accept the obligations of the control of | tion, I hereby accept the appointment ons of all statutes relative to the property position as feetifiered against NR position for the property of the propert | of process for the above stated limited liabilities as registered agent and agree to act in this are and complete performance of my duties, | s capacity. I further agree                         |
|  |  | gent's signature)   |   |
| 8. The name, title or capa   | icity and address of the person(s) who   | has/have authority to manage is/are:  |   |
| Just Salad LLC, Sole Men   | nber by: Nick Kenner, CEO, 663 Lexi  | ngton Ave, 2nd Floor, New York, NY 1002   | 2   |
| <del>-</del> "   |  |   |   |
|  |  |   |   |
|  |  |   | <del></del>   |
| <ol> <li>Attached is a certificate urisdiction under the law of the translator must be su</li> </ol>   | of which it is organized. (If the certific   | d, duly authenticated by the official having c<br>rate is in a foreign language, a translation of   | ustody of records in the the certificate under oath |
|  | 1/1/2  |   |   |
|  | Signature of an  | authorized person   |   |
| This document is executed submitted in a document to   | in accordance with section 605.0203 (<br>the Department of State constitutes a   | (1) (b), Florida Statutes, I am aware that any third degree felony as provided for in s.817.  | false information<br>155, F.S.                      |
|  | Just Salad LLC, Sole Member by: Ni   |   |   |
|  | Typed or printed   | name of signee  |   |



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

DELAWARE, DO HEREBY CERTIFY "JUST SALAD FT LAUDERDALE, LLC" IS DULY

FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE NINETEENTH DAY OF MARCH, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "JUST SALAD FT LAUDERDALE, LLC" WAS FORMED ON THE FIFTEENTH DAY OF MARCH, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.

7327479 8300 SR# 20192110226

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

Authentication: 202475872

Date: 03-19-19