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(Re	equestor's Name)	
(Ac	ldress)	
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(Ci	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL MAIL
(Bı	usiness Entity Nam	e)
(Do	ocument Number)	·
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 07/01/2022	-		₩WALK IN*
۸۷ <i>۸</i> ۵۷		•	WALK IV
ENTITY NAME AVA CO	DCONOT GROVE LLC		
DOCUMENT NUMBER_			
	PLEASE FILE TH	E ATTACHED AND RETURN	
xxxxxx	Plain Copy		
	Certified Copy		
<u> </u>	Certificate of Status		
** /	Certified Copy of Arts		
	Certificate of Good Sta **APOSTILLE' / N	OTARIAL CERTIFICATION**	
COUNTRY OF DESTINAT			
NUMBER OF CERTIFICA.	TES REQUESTED		
TOTAL OWED \$125		ACCOUNT #: I2016000007	2
		5. R 7/10	
Please call Time at the	ke ahave number kan	any issues or concerns. Thank you s	o much!

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

AVA Coconut Grove.	LLC					
(Name of Foreign	Limited Liability Company; must include "Li	mited Liabilit	y Company," "L.L.C.," or "LLC.")			
					 -	
If name unavailable, enter alternate r	same adopted for the purpose of transacting business	in Florids. The	alternate name must include "Linuted Liability	у Сопършау," *	"L.L.C," or	"El.C.")
Delaware 2.		3.	88-3059106			
Durisdiction under the law of w	hich foreign limited lishility company is organized).	_	(FF) number, if	abblicaple)		
4						
4	(Date first transacted business in Florida, if pri (See sections 605.0904 & 605.0905, F.S. to de	or to registration termine penalty	1) bability)	- ≯s	2022	
800 Lincoln Road, Sui	te 300	6.	800 Lincoln Road, Suite 300	EL Ai	11 22	
(Street Address of Principal Office)		U.	(Mulling Address)	25.5 20.5	1	—
Miami Beach, FL 33139			Miami Beach, FL 33139	ASSET.		T
				=	==	_ <u>; </u>
				TI ON IN		_
				⊃r: >>	Š	
7. Name and street addres	s of Florida registered agent: (P.O. I	Box <u>NOT</u>	acceptable)			
Name:	Unisearch, Inc.					
Office Address:	1990 Main Street, Suite 750-509					
	Sarasota		34236 , Florida	_		
	(City)		(Zip code)	_		

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated limited liability company 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.

Deberah Brown
(Registered agent's signature)

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
■Manager	Name: Riviera Dining Group Inc.	□Manager	Name: Gregory Galy
□Member	Address: 800 Lincoln Road, Suite 300	□Member	Address: 800 Lincoln Road, Suite 300
□Authorized	Miami Beach, FL 33139	■Authorized	Miami Beach, FL 33139
Person		Person	
Other	Other	□Other	Other
□Manager	Name: Fabien Guardiola	□Manager	Name:
□Member	Address: 800 Lincoln Road, Suite 300	□Member	Address:
■Authorized	Miami Beach, FL 33139	□Authorized	
Person		Person	
□Other	Other	□Other	Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	
□Other	Other	□Other	□Other

<u>Important Notice</u>: 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.

- 9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)
- 10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any 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.

GREGORY GA	LY
6030AFB99A65418	Signature of an unthorized person
Gregory Galy	
	Typed or printed name of signee

Page 1



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

DELAWARE, DO HEREBY CERTIFY "AVA COCONUT GROVE, 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 THIRTIETH DAY OF JUNE, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "AVA COCONUT GROVE, LLC" WAS FORMED ON THE TWENTY-EIGHTH DAY OF JUNE, A.D. 2022.

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

Authentication: 203811737

Date: 06-30-22