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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : BERGER SINGERMAN LLP, FT.LAUDERDALE

Account Number : I20020000154 Phone : (954)712-5119 Fax Number : (954)523-2872

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allan@puravidamiami.com ' Email Address:\_\_

## Foreign Limited Liability Company PURA VIDA WEST BOCA RATON LLC

Certificate of Status	i		
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## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION 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

(Name of Foreig	Limited Liability Company, must include "Limite	d Liability Company," "L L.C.," or "LLC.")	
	name adopted for the purpose of transacting business in Fl	orida. The alternate name must include "Limited Lia	bility Company," "L L.C." or "Li
Delaware		03 2345102	
(Jurisdiction under the law of w	which foreign limited liability company is organized)	3. 92-2245107 (FE) nilmbs	r, if applicable)
		, or simple	i, o appointe)
			*. -
	(Date birst transacted business in Florida, if prior to (See sections 695,0904 & 605,0905, F.S. to determi	(Egistration)	
	(546 sections 605,0904 & 605,0905, F.S. to determi	ne penalty liability)	
8170 Glades Road		1924 Alton Road	•
Address of Principal Office)		6	
Suite K-I		<del>*</del>	_
Suite V-I			• •
			<del></del>
Boca Raton, FL 33434		Miami Beach, FL 33139	
	<del></del>		
Nome and every address	a - F Ti - i d		
vante and Mieer addie:	is of Florida registered agent: (P.O. Box	NOI acceptable)	
NT	Cogency Global Inc.		
Name:			
	115 North Calhoun Street, Suite 4		
Office Address:			
	Tallahassee	37201	
	· watership DC	32301 , 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.

> Merritt Walker
> (Registered agent's signature) Merritt Walker, Asst. Secretary

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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	<u>{</u>	Name and Address:
■Manager	Name: Adama Hospitality LLC	□Manager	Name;	
□Member	Address: 1924 Alton Road	□Member		
□Authorized		☐ Authorized		
Person	Miami Beach, FL 33139	Person		
Other	Other	Other	<del></del>	□ Other
☐ Manag <del>a</del> r	Name:	□Manager	Name:	
□Member	Address:	□Member	Address:	
□Authorized		☐ Authorized		:=
Person		Person		
□ Other	Ci Other	Other		□ Other
□Manager	Name:	□ Manager	Name;	<del>-</del>
□Member	Address:	☐ <b>Me</b> mber	Address:	
□ Authorized		□Authorized		
Person		Person		
Other	Other	Other	<del></del>	□ Other

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed 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.

Signature of an authorized person.

OMER HOREV

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## Delaware The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PURA VIDA WEST BOCA RATON 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 EIGHTH DAY OF FEBRUARY, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PURA VIDA WEST BOCA RATON LLC" WAS FORMED ON THE SEVENTH DAY OF FEBRUARY, A.D. 2023.

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

Authentication: 202671356

Date: 02-08-23