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Florida Department of State
Division of Corporations
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To: Division of Corporations
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TALLAHASSEE, FL

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FOREIGN PROFIT/NONPROFIT CORPORATION
NUMBER 1 BEST COMPANY, inc.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

Requesting the original filing date of 5/24/22. Thank you!

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Corporate Filing Menu

Help

S. ROBERTS

MAY 24 2022

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. Number 1 Best Company, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Ine.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Delaware 3. 86-3927448
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 03/16/2022 5.
(Date of incorporation) (Date of duration, if other than perpetual)

6.
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 643 Jefferson Ave #1, Miami Beach, FL 33139
(Principal office street address)

301 NW 71st St, Miami, FL 33150
(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
Name: C T Corporation System
Office Address: 1200 S Pine Island Rd
Plantation, Florida 33324
(City) (Zip code)

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9. Registered agent's acceptance:
Having been named as registered agent and to accept service of process for the above stated corporation 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.

Stephane Honey

(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.

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

A. DIRECTORS

Chairman Name: Meghan Browning

Vice Chairman Address: 643 Jefferson Ave #11

Director Miami Beach, FL 33139

President _____

Vice President _____

Secretary Treasurer

Other Chief Executive Officer Other _____

Chairman Name: Surinder Singh

Vice Chairman Address: 402 Sterling Pl

Director Brooklyn, NY 11238

President _____

Vice President _____

Secretary Treasurer

Other Chief Financial Officer Other _____

Chairman Name: Alexander Ferzan

Vice Chairman Address: 643 Jefferson Ave #11

Director Miami Beach, FL 33139

President _____

Vice President _____

Secretary Treasurer

Other Chief Marketing Officer Other _____

Chairman Name: Zachary Ferzan

Vice Chairman Address: 645 NE 77th St #2

Director Miami, FL 33138

President _____

Vice President _____

Secretary Treasurer

Other Vice President of Operations Other _____

Chairman Name: _____

Vice Chairman Address: _____

Director _____

President _____

Vice President _____

Secretary Treasurer

Other _____ Other _____

Chairman Name: _____

Vice Chairman Address: _____

Director _____

President _____

Vice President _____

Secretary Treasurer

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. _____
(Signature)
 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, P.S.

13. Surinder Singh (Chief Financial Officer, Secretary and Treasurer)
 (Typed or printed name and capacity of person signing application)

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "NUMBER 1 BEST COMPANY, 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 TWENTY-FOURTH DAY OF MAY, A.D. 2022.

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



Jeffrey W. Bullock
Jeffrey W. Bullock, Secretary of State

Authentication: 203506883

Date: 05-24-22

5925406 8300
SR# 20222259912

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