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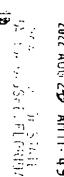
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## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Tinylvy, Inc.	
	on - must include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for "Certificate of Existence," or "Certificate of Good Stabove referenced foreign corporation to transact businesses."	anding" and check are submitted to register the
Please return all correspondence concerning this mati	ter to the following:
Zachary Silverzweig	
Name o	of Person
TinyIvy, Inc.	
Firm/Co	ompany
400 W 61st Street, 37 A	
Add	dress
NY, NY 10069	
City/State	and Zip code
zach@tinyivy.com	_
E-mail address: (to be used	for future annual report notification)
For further information concerning this matter, please	e call:
Zachary Silverzweig at ( 917	994-0406
Name of Person Area Co	
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount:  Please make check payable to: FLORIDA DEPARTMEN  \$ \$70.00 Filing Fee \$ \$78.75 Filing Fee & Certificate of Status	TT OF STATE  □ \$78.75 Filing Fee & □ \$87.50 Filing Fee, Certified Copy 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.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp." "Inc.," "Co.," or "Corp.")  TIPS  (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)  Delaware  (State or country under the law of which it is incorporated)  (Date of incorporation)  (Date of incorporation)  (Date of incorporation)  (Date of incorporation)  (Date first transacted business in Florida, if prior to registration)  (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  (Principal office street address)  (Current mailing address: if different)  (Current mailing address: if different)  Name:  Rebecca K, Silverzweig  Office Address:  1526 NE Manth Lane  Port St. Lucie  Port St. Lucie  (City)  Registered agent's acceptance:  (City)  Registered agent and garee to act in this cappaintment as registered agent and agree to act in this cappaintment agree to comply with the provisions of all statutes relative to the proper and complete performance of my and 1 am familiar with and accept the obligations of my position as registered agent.	Tinylvy, Inc.						
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)  Delaware (State or country under the law of which it is incorporated)  June 20, 2020  (Date of incorporation)  (Date of incorporation)  (Date of incorporation)  (Date of incorporation)  (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  (Principal office street address)  (Current mailing address, if different)  Name:  Rebecca K. Silverzweig  Office Address:  Port St. Lucie  Office Address:  Port St. Lucie  (City)  Registered agent's acceptance:  Having been named as registered agent and to accept service of process for the above stated corporation at the plesignated in this application, I hereby accept the appointment as registered agent and agree to act in this capacitarther agree to comply with the provisions of all statutes relative to the proper and complete performance of my mind I am familiar with and accept the obligations of my position as registered agent.	(Enter name of control "Inc.," "Co.," "Co.,"	corporation; must include "INCORPORATED Corp," "Inc," "Co," or "Corp.")	," "COMPANY," "CORPORATION	٧,"	-		
2. Delaware  (State or country under the law of which it is incorporated)  (State or country under the law of which it is incorporated)  (Date 20, 2020  (Date of incorporation)  (Date of duration, if other than perpetual)  (Date of duration, if other than perpetual)  (Date of duration, if other than perpetual)  (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  (Principal office street address)  (Current mailing address, if different)  (Curr	TIPS						
Delaware   3.   86-1829396     Content of incorporation   (PEI number, if applicable)     Iune 20, 2020   (Date of incorporation)   (Date of duration, if other than perpetual)     N/A	(If name unavail	able in Florida, enter alternate corporate name	adopted for the purpose of transacting	g business in Florida)	-		
(State or country under the law of which it is incorporated)  June 20, 2020  (Date of incorporation)  (Date of incorporation, if other than perpetual)  (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  (Principal office street address)  (Current mailing address, if different)  (Current mailing address, if different)  Name:  Rebecca K. Silverzweig  (City)  Report St. Lucie  Port St. Lucie  (City)  Registered agent's acceptance:  Inving been named as registered agent and to accept service of process for the above stated corporation at the pesignated in this application, I hereby accept the appointment as registered agent and agree to act in this capacitarther agree to comply with the provisions of all statutes relative to the proper and complete performance of my and I am familiar with and accept the obligations of my position as registered agent.	Delaware	elaware 96 1920206					
June 20, 2020   5.   (Date of incorporation)   (Date of duration, if other than perpetual)	(State or country under the law of which it is incorporated)				-		
(Current mailing address, if different)  Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name: Rebecca K. Silverzweig  1526 NE Manth Lane  Port St. Lucie  Port St. Lucie  City)  Registered agent's acceptance:  Registered agent and to accept service of process for the above stated corporation at the pesignated in this application. I hereby accept the appointment as registered agent and agree to act in this capaturither agree to comply with the provisions of all statutes relative to the proper and complete performance of my and I am familiar with and accept the obligations of my position as registered agent.	June 20, 2020		•	•			
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(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  400 W 61st Street, 37 A, NY, NY 10069  (Principal office street address)  (Current mailing address, if different)  Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name: Rebecca K. Silverzweig  1526 NE Manth Lane  Port St. Lucie  (City)  Registered agent's acceptance: (aving been named as registered agent and to accept service of process for the above stated corporation at the pesignated in this application. I hereby accept the appointment as registered agent and agree to act in this capausither agree to comply with the provisions of all statutes relative to the proper and complete performance of my and I am familiar with and accept the obligations of my position as registered agent.	N/A	,	(Dute of duliniss, if other t	nan perpetuar)			
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	urther agree to co	omply with the provisions of all statutes r	elative to the proper and complete	e to act in this capac eperformance of my	rity. Auto		
/Rebecca Kate Silverzweig/		/Rebecca Kate Silverzweig/					
(Registered agent's signature)	_	(Registered agent's si	gnature)				

under the law of which it is incorporated.

the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction

<sup>11.</sup> 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:	□Chairman	Name:			
□Vice Chairman	Address: 400 W 61st Street, 37A	□Vice Chairman	Address:			
Director	NY, NY 10069	□Director				
President		□President				
□Vice President		□Vice President				
□Secretary	□Treasurer	Secretary	□Treasurer			
□Other	Other	Other				
_						
□ Chairman	Name:	□ Chairman	Name:			
☐ Vice Chairman	Address:	□Vice Chairman	Address:			
□Director		□Director				
President		□President				
□Vice President		□Vice President				
□Secretary	□Treasurer	☐ Secretary	☐ Treasurer			
□Other	Other	Other	Other			
□Chairman	No					
	Name:	□Chairman	Name:			
□ Vice Chairman	Address:	□Vice Chairman	Address:			
□Director		□Director				
□President		□President				
□Vice President		☐ Vice President	<del></del>			
□Secretary	□Treasurer	□Secretary	□Treasurer			
□Other	Other	□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 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, F.S.

<u>Delaware</u>

The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "TINYIVY, 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 TENTH DAY OF AUGUST, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TINYIVY, INC."

WAS INCORPORATED ON THE TWENTY-SIXTH DAY OF SEPTEMBER, A.D. 2019.

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



Jeffry W. Dallach, Encretary of Elafo