

Application for Registration

FOREIGN Limited Liability Company

→ Filing Fee: \$150.00

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2021 HAR -8 P 1: 27

Pursuant to the provisions of RIGL <u>7-16-49</u> , the undersigned for applies for a Certificate of Registration to transact business in the purpose submits the following statement:	reign limited liability company l he State of Rhode Island, and	hereby for that
The name of the limited liability company is:		
Cava Mezze Grill, LLC		
Is this company organized in its state or country of formation a	as a low-profit limited liability co	ompany? Yes No 🗵
The name, if different, under which it proposes to register and	transact business in Rhode Is	land is:
2. The LLC is organized under the laws of MD		
3. The date of its organization is: 6/4/2010		
And the period of its duration is: CHECK ONE BOX ONLY		
Perpetual (on-going)		
Date certain for dissolution		
4. The name and address of the resident agent/office in Rhod	e Island is:	
Agent Name C T Corporation System		
Street Address (NOT a P.O. Box) 450 Veterans Memorial Parkw	ray, Suite 7A	
City/Town East Providence	State RHODE ISLAND	Zip Code 02914
5. The purpose or purposes which it proposes to pursue in the	e transaction of business in Rh	ode Island are:
corporate and design support for business		
	Check the bo	ox to indicate an attachment 🔲

MAIL TO:

Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri gov 1:27 FILED MAR - 8 2021 BY A RMECV

C. The Ci December of Chair is acceptable	d the agent of the foreign limited liability company for	or sentice of process if at	
eny time, there is no resident agent or if the diligence.	e resident agent cannot be found or served following	og the exercise of reasonable	
7. The address of the office required to be if not so required, of the principal office of	maintained in the state or country of its organizatio the foreign limited liability company is:	n by the laws of that state or.	
838 Park Ave. Unit C, Bultimore, MD 21202			
8. The mailing address for the limited liabi	ify company is:		
702 H Street NW, 2nd Floor, Washington, DC	20001		
Management of the Limited Liability Co.	трапу:		
The Limited Liability Company is to be ma	naged by: CHECK ONLY ONE BOX		
🔀 By its members (If you have checked	this box, go to Section 9. (DO NOT fill out the char	t below.)	
By one (1) or more managers (List managers below)			
MANAGER	ADDRESS		
		:	
10. This application must be accompanied by a <u>Certificate of Good Standing/Letter of Status</u> from the state or country of formation dated within 60 days of the date of filing.			
11. Date when this application for Certificate of Registration will be effective. CHECK ONE BOX ONLY			
Date received (Upon filing)			
Later effective date (Date must be no	more than 90 days from the date of filing)		
Under penalty of perjury, I declare and aff accompanying attachments, and that all s	irm that I have examined this Application for Regist determents contained herein are true and correct.	retion, including any	
Type or Print Name of LLC		Date	
Cava Mezze Grill, LLC		3/4/2021	
Signature of Authorized Person			

STATE OF MARYLAND Department of Assessments and Taxation

I, MICHAEL I.. HIGGS OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO LIMITED LIABILITY COMPANIES, OR THE RIGHTS OF LIMITED LIABILITY COMPANIES TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT CAVA MEZZE GRILL, LLC (W13598982), REGISTERED JUNE 04, 2010, IS A LIMITED LIABILITY COMPANY EXISTING UNDER AND BY VIRTUE OF THE LAWS OF THE STATE OF MARYLAND, AND THAT THE LIMITED LIABILITY COMPANY IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING TO TRANSACT BUSINESS.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS MARCH 05, 2021.

Michael L. Higgs

Director



301 West Preston Street, Baltimore, Maryland 21201 Telephone Baltimore Metro (410) 767-1340 / Outside Baltimore Metro (888) 246-5941 MRS (Maryland Relay Service) (800) 735-2258 TI/Voice

> Online Certificate Authentication Code: FQU2Zqu1TUi1pnK7D878Lg To verify the Authentication Code, visit http://dat.maryland.gov/verify