

2/4/2021

Division of Corporations

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Florida Department of State
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Email Address: CONSULTING@DRUMMONDADVISORS.COM

FOREIGN PROFIT/NONPROFIT CORPORATION

Timpel Medical Corp.

Certificate of Status	0
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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. Timpel Medical Corp.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

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

2. Delaware 3. 85-0927732
(State or county under the law of which it is incorporated) (FEI number, if applicable)

4. 4/27/2020 5. Perpetual
(Date of incorporation) (Date of duration, if other than perpetual)

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

7. 300 Delaware Avenue 250, Wilmington, Delaware 19801
(Principal office street address)
(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Drummond Consulting, LLC
Office Address: 601 Brickell Key Drive Suite 901
Miami, Florida 33131
(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.

(Registered agent's signature) Michel de Amorim - Member of Drummond Consulting, LLC

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]:

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A. DIRECTORS

Chairman Name: Rafael Holzhaecker

Vice Chairman Address: _____

Director 300 Delaware Avenue 256

President Wilmington, Delaware 19801

Vice President _____

Secretary Treasurer

Other _____ Other _____

Chairman Name: Joselita Botelho Cunha

Vice Chairman Address: _____

Director 300 Delaware Avenue 256

President Wilmington, Delaware, 19801

Vice President _____

Secretary Treasurer

Other _____ Other _____

Chairman Name: Joselita Botelho Cunha

Vice Chairman Address: _____

Director 300 Delaware Avenue 256

President Wilmington, Delaware 19801

Vice President _____

Secretary Treasurer

Other _____ Other _____

Chairman Name: Joselita Botelho Cunha

Vice Chairman Address: _____

Director 300 Delaware Avenue 256,

President Wilmington, Delaware 19801

Vice President _____

Secretary Treasurer

Other _____ Other _____

Chairman Name: Joselita Botelho Cunha

Vice Chairman Address: _____

Director 840 Summer Street Suite 206,

President Boston, Massachusetts 02127

Vice President _____

Secretary Treasurer

Other _____ Other _____

Chairman Name: Rafael Holzhaecker

Vice Chairman Address: _____

Director Rua Simoes Alvares 365,

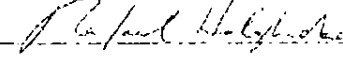
President Sao Paulo, 05417-020

Vice President _____

Secretary Treasurer

Other _____ Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be indexed 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 § 817.155, F.S.

13 Rafael Holzhaecker, President
(Typed or printed name and capacity of person signing application)

Delaware

The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TIMPEL MEDICAL CORP." 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-FIRST DAY OF JANUARY, A.D. 2021.

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



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

7949279 8300

SR# 20210186369

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

Authentication: 202339789

Date: 01-21-21