

M 23000007630

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

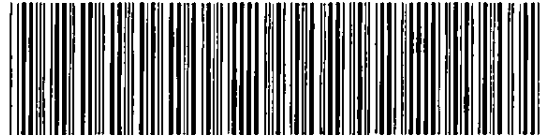
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section  
Division of Corporations

TOMA US Holdings LLC Orlando 2

SUBJECT: \_\_\_\_\_  
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Leonardo Liberato

\_\_\_\_\_  
Name of Person

TOMA US Holdings LLC Orlando 2

\_\_\_\_\_  
Firm/Company

7901 4th St N STE 300

\_\_\_\_\_  
Address

St. Petersburg, FL 33702

\_\_\_\_\_  
City/State and Zip Code

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Leonardo Liberato

\_\_\_\_\_  
Name of Contact Person

at ( 302 ) 288-0670

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

- \$125.00 Filing Fee     \$130.00 Filing Fee & Certificate of Status     \$155.00 Filing Fee & Certified Copy     \$160.00 Filing Fee, Certificate of Status & Certified Copy

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:

1. TOMA US Holdings LLC Orlando 2  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "L.C.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "L.C.")

2. Delaware  
(Jurisdiction under the law of which foreign limited liability company is organized)

3. \_\_\_\_\_  
(FEI number, if applicable)

4. N/A (entity not yet transacting business in Florida)  
(Date first transacted business in Florida, if prior to registration)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 7901 4th St N STE 300  
(Street Address of Principal Office)

6. 7901 4th St N STE 300  
(Mailing Address)

St. Petersburg, FL 33702

St. Petersburg, FL 33702

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

Name: Registered Agents Inc.

Office Address: 7901 4th St N STE 300

St. Petersburg, Florida 33702  
(City) (Zip code)

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TALLAHASSEE, FLORIDA

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.

Bee Home  
(Registered agent's signature)

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:**  Manager      **Name and Address:** Name: TOMA US Holdings LLC  
 Member      Address: 8 The Green STE A  
 Authorized Person      Dover, DE 19901  
 Other \_\_\_\_\_       Other \_\_\_\_\_

**Title or Capacity:**  Manager      **Name and Address:** Name: Good Hope Opportunities LLC  
 Member      Address: 8 The Green STE A  
 Authorized Person      Dover, DE 19901  
 Other \_\_\_\_\_       Other \_\_\_\_\_

Manager      Name: \_\_\_\_\_  
 Member      Address: \_\_\_\_\_  
 Authorized Person      \_\_\_\_\_  
 Other \_\_\_\_\_       Other \_\_\_\_\_

Manager      Name: \_\_\_\_\_  
 Member      Address: \_\_\_\_\_  
 Authorized Person      \_\_\_\_\_  
 Other \_\_\_\_\_       Other \_\_\_\_\_

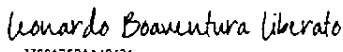
Manager      Name: \_\_\_\_\_  
 Member      Address: \_\_\_\_\_  
 Authorized Person      \_\_\_\_\_  
 Other \_\_\_\_\_       Other \_\_\_\_\_

Manager      Name: \_\_\_\_\_  
 Member      Address: \_\_\_\_\_  
 Authorized Person      \_\_\_\_\_  
 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.

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.

DocuSigned by:  
  
 37801866AA42431  
 \_\_\_\_\_  
 Signature of an authorized person

**Leonardo Liberato**  
 \_\_\_\_\_  
 Typed or printed name of signer

# Delaware


The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TOMA US HOLDINGS LLC ORLANDO 2" 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 TWENTY-SECOND DAY OF MAY, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID "TOMA US HOLDINGS LLC ORLANDO 2" IS A SERIES LIMITED LIABILITY COMPANY.



  
Jeffrey W. Bullock, Secretary of State

7475400 8300E  
SR# 20232242688

Authentication: 203399374  
Date: 05-22-23

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)