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| | (Requestor's Name) |
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| Carriella de cata de | File - 046 |
| Special Instructions to | Friing Officer: |
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Office Use Only



2023 AUG 16 PH 3: 46 RECEIVED



To: Department Of State, Division Of Corporations

From: Eyliena Baker

Ext: 61594 Date: 08/16/23 Order #: 1254275-1

Re: Holtec Security International, LLC

Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Application for Certificate of Authority

Amount to be deducted from our State Account: \$125.00 - FL State Account Number:

neillenan

12000000195

auth

Please take the following action:

File in your office on basis

Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

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:

| (If name unavailable, enter alternate | name adopted for the purpose of transacting business in Flori | ida. The alternate name must include "Limited Liabi | ility Company," "I. L.C," or "LLC,") | |
|---|---|---|--------------------------------------|--|
| DE 2. | | 86-2515068 | | |
| (Jurisdiction under the law of which foreign limited hability company is organized) | | 3. (FhI number, | (Fh1 number, if applicable) | |
| upon filing | | | | |
| 4. <u> </u> | (Date first transacted business in Florida, if prior to reg (See sections 605.0904 & 605.0905, F.S. to determine | gistration.) penalty liability) | | |
| _ | | Same | | |
| 5. (Street Address of Principal Office) | | 6. (Mailing Address) | S1 20 | |
| 1 Holtec Blvd | | | T T | |
| Camden, NJ 08104 | | | 5 | |
| | | | 7 | |
| 7. Name and street addres | ss of Florida registered agent: (P.O. Box 1 | NOT acceptable) | | |
| 7. Name and street address Name: | ss of Florida registered agent: (P.O. Box) Corporation Service Company | <u>NOT</u> acceptable) | | |
| | | NOT acceptable) | 200 Signature 1 | |
| Name: | Corporation Service Company 1201 Hays Street Tallahassee | 32301 | 257 E | |
| Name: | Corporation Service Company 1201 Hays Street | | | |

(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: Name and Address: Title or Capacity: Name and Address: Name: _ Holtec Power, Inc □Manager □Manager Name: _____ Address: 1 Holtec Blvd **■** Member ☐ Member Address: Camden, NJ 08104 ☐ Authorized ☐ Authorized Person Person □Other_____ Other____ □Other □Other_____ Name: □Manager Name: □Manager Address: ☐ Member □Member Address: ☐ Authorized ☐ Authorized Person Person □Other_____ □Other____ □Other_____ □Other__ □Manager Name: Name: □ Manager □Member Address: □Member Address: □Authorized □ Authorized Person Person □Other____ □Other____ Other □Other Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed 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. /s/ Martin Babos Signature of an authorized person Martin Babos

Typed or printed name of signee



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

DELAWARE, DO HEREBY CERTIFY "HOLTEC SECURITY INTERNATIONAL, LLC" 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 SIXTEENTH DAY OF AUGUST, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "HOLTEC SECURITY INTERNATIONAL, LLC" WAS FORMED ON THE TWENTY-SIXTH DAY OF FEBRUARY, A.D. 2021.

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

AND SOLVER TO SO

Authentication: 203977137

Date: 08-16-23