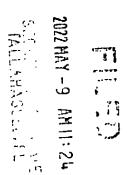
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S. ROBERTS

COVER LETTER

TO: Registration Section			
Division of Corporations			
OMNIS SOLIDITY CAPITA	AL LP		
SUBJECT:			
Name of Foreign Lir	nited Partnership or Limit	ed Liability Limited Partnership	
The enclosed application, certificate of sta	atus and fees are submitted	I to register a foreign limited partnership or lim	ited liability limited
partnership to transact business in Florida		to register a torongs minited paranetship of this	neu nuonny minee
Please return all correspondence concerni			
•			
FEDERICO DE GRAZIA			
Contact Perso	<u> </u>		
PARIS CONSULTING GROUP, LLC	<i>,</i> ,,		
Firm/Compar	ıy		
6750 N ANDREWS AVE STE 200			
Address	····		
FT. LAUDERDALE, FL 33309			
11. LAODERDALL, 11. 33307			
City, State and Zip	Code	 -	
FDG@PARIS-LAWGROUP.COM			
E-mail address: (to be used for future ar	inual report notification)		
·	•		
For further information concerning this m			
FEDERICO DE GRAZIA	954	9945703	
Name of Contact Person	at (e and Daytime Telephone Number	
Name of Contact Person	Alea Coo	e and Daytime Telephone Number	
Enclosed is a check for the following amo	ount:		
	_		
■\$1,000.00 Filing Fee □\$1,008.75 F			
(\$965 Filing Fee and and Certifi	cate of and Certif	• • • • • • • • • • • • • • • • • • • •	
\$35 Registered Agent Status Fee)		Certificate of Status	
100)			
Mailing Address:		Street Address:	
Registration Section		Registration Section	

Division of Corporations

Tallahassee, FL 32303

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP TO TRANSACT BUSINESS IN FLORIDA

OMNIS SOLIDITY CAPITAL LP (Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix) Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd. Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP. OMNIS SOLIDITY INVESTMENTS LP If name unavailable, name under which the limited partnership or limited liability limited partnership proposes to register to transact business in Florida; must contain acceptable suffix. 04/27/2022 CANADA State or Country of Formation Date of Formation 4. Federal Employer Identification Number: ______ 5. Name of Registered Agent for Service of Process and Florida Street Address: PARIS CONSULTING GROUP, LLC 6750 N ANDREWS AVE STE, 200 FT. LAUDERDALE, FL 33309 6. 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 familial with and accept the obligations of my position as registered agent. Signature of Registered Agent 7. Principal Office: 8. Mailing Address: 1600 PONCE DE LEON BLVD 10TH FLOOR 1600 PONCE DE LEON BLVD 10TH FLOOR CORAL GABES, FL 33129 CORAL GABLES, FL 33129 USA USA 9. If limited partnership is a limited liability limited partnership, check box. 10. Name, principal office address, and mailing address of each general partner: OMNIS SOLIDITY CORPORATION Name of General Partner: Name of General Partner: 176 Saint George Street Ste 2E Street Address: Street Address: Toronto, CANADA M5R 2M7 Mailing Address: _____ Mailing Address: _____ Name of General Partner:_______Name of General Partner: Street Address: ______ Street Address: _____

Mailing Address: _____ Mailing Address: _____

Page 1 of 2

	• •	
Name of General Partner:	Name of General Partner:	
	* ', <u> </u>	
Street Address:	Street Address:	· · · · · · · · · · · · · · · · · · ·
		•
	<u>-</u>	
A4 27 A 11	Section Address.	
Mailing Address:	Mailing Address:	
1. Effective date, if other than the date of filing:		
Effective date cannot be prior to nor more than 90 day	s after the date this document is filed by the Florida L	Pepartment of State.)
Note: If the date inserted in this block does not meet the	e applicable statutory filing requirements, this date wi	II not be listed as the
	records	
locument's effective date on the Department of State's	100103.	
locument's effective date on the Department of State's	,	
	•	s application to the
2. Attached is a certificate of existence duly authenticate	ated, not more than 90 days prior to the delivery of this	
2. Attached is a certificate of existence duly authentical forida Department of State, by the Secretary of State of	ated, not more than 90 days prior to the delivery of this	
12. Attached is a certificate of existence duly authentical Florida Department of State, by the Secretary of State of the law of which it is organized.	ated, not more than 90 days prior to the delivery of this other official having custody of the entity's records	
12. Attached is a certificate of existence duly authentical Florida Department of State, by the Secretary of State of the law of which it is organized.	ated, not more than 90 days prior to the delivery of this other official having custody of the entity's records	
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The individual signing this document affirms that the facubmitted in a document to the Department of State con	ited, not more than 90 days prior to the delivery of this or other official having custody of the entity's records a second seco	that false information

Page 2 of 2



Ministry of Government and Consumer Services Ministère des Services gouvernementaux et des Services aux consommateurs

Declaration of an Ontario Limited Partnership

Déclaration d'une société en commandite de l'Ontario

Limited Partnerships Act

Loi sur les sociétés en commandite

OMNIS SOLIDITY CAPITAL

Firm Name / Raison sociale

1000188168

Business Identification Number / Numéro d'identification d'entreprise

This is to certify that the above named limited partnership declaration has been filed under the laws of the Province of Ontario.

La présente vise à attester que la déclaration de la raison sociale de la société en commandite citée ci-dessus a été déposée conformément aux règles de droit de la province de l'Ontario.

Declaration Date: April 27, 2022

Date de déclaration: 27 avril 2022

Expiry Date: April 26, 2027

Date d'expiration: 26 avril 2027

Registrar / Registrateur

Limited Partnerships Act / Loi sur les sociétés en commandite

Sacbara Duckett

s certificate is not complete without the laration information.

ified a true copy of the record of the stry of Government and Consumer Services.

zebana Ducketts
tor/Registrar



Le présent certificat n'est pas complet sans les renseignements afférents à la déclaration.

Copie certifiée conforme du dossier du ministère des Services gouvernementaux et des Services aux consommateurs.

Salbara Duckett

Directeur ou registrateur