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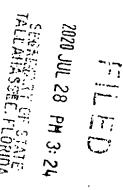
(Requestor's Name)			
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PICK-UP	☐ WAIT	MAIL	
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(Document Number)			
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COVER LETTER

	tration Section on Corporations				
SUBJECT:	Garofalo USA, Inc.				
	Name	of corporation	- must include suffix		
Dear Sir or M	adam:				
"Certificate of	"Application by Foreign C Existence," or "Certifica ced foreign corporation to	te of Good Stand	ding" and check are sub-		•
	all correspondence concer	ning this matter	to the following:		
Catherine Kast	ning			SE SE	<u></u>
Funaro & Co.,	P.C.	Name of I	Person		: : : : :
		Firm/Com	pany	<u> </u>	****
350 Fifth Aven	ue, 41st Floor				p l.
		Addre	SS		<u>بر</u>
New York, NY	10118			ラボ	24
	<u></u>	City/State ar	nd Zip code		
catherine.kastn	ing@funaro.com				
	E-mail addre	ss: (to be used for	or future annual report n	otification)	
For further inf	formation concerning this	matter, please ca	all:		
Catherine Kasu	ning	at (212	273-5394		
Name	e of Person	Area Code	Daytime Teleph	none Number	
Regist Divisi The C 2415 I	cet/Courier address tration Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 8 lassee, FL 32303		MAILING A Registration So Division of Co P.O. Box 6327 Tallahassee, F	ection orporations	
	check for the following an eck payable to: FLORIDA I ng Fee	DEPARTMENT ng Fee &	OF STATE \$78.75 Filing Fee & Centified Copy	☐ \$87.50 Filing For Certificate of S Certified Copy	

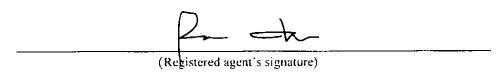
APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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. Garofalo USA,	Inc.		
	orporation; must include "INCORPORATED," "(orp," "Inc," "Co." or "Corp.")	COMPANY," "CORPORA"	TION,"
	. ,		
(If name unavail	able in Florida, enter alternate corporate name ado	pted for the purpose of trans	acting business in Florida)
2. Connecticut	3.		
(State or countr	or country under the law of which it is incorporated) (FEI number, if applicable)		if applicable)
4. September 3, 20	5		
	of incorporation)	(Date of duration, if o	ther than perpetual)
6. Upon filing			
	(Date first transacted business in F)	-	
	(SEE SECTIONS 607.1501 & 607.1502,	, F.S., to determine penalty i	iaomty)
7. 10 East 39th Stre	et, 12th Floor, Office 6, New York, NY 10016		
	(Principal office s	street address)	<i>₹</i>
c/o Funaro & Co	., P.C., 350 Fifth Avenue, 41st Floor, New York, 1		
	(Current mailing a	ddress, if different)	2020 JUL 28
			25.
8. Name and stree	et address of Florida registered agent: (P.O. H	Box NOT_acceptable)	
Name:	Funaro & Co., P.C.		PH 3: 24 FLORIDA
0.00	1221 17 1 1 1 4 5 5 5 11 (0)		
Office Address:	1221 Brickell Avenue, Suite 1160	_	第四 2
		_ , Florida <u>33131</u>	_
	(City)	(Zip code)	

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.



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):

A. DIRECTORS	,		
□Chairman	Name: Massimo Menna	□Chairman	Name: Piero Signorini
□Vice Chairman	Address: Via dei Pastai, 42	□Vice Chairman	Address: 10 East 39th Street, 12th Floor
Director	80054 Gragnano (NA)	□Director	Office 6
□President	Italy	■ President	New York, NY 10016
□Vice President		□Vice President	
☐ Secretary	□Treasurer	☐ Secretary	□Treasurer
■Other <u>CEO</u>	□ Other	Other	□Other
□Chairman	Name: Flavia Garzia	□Chairman	Name: Giovanni Schisa
□Vice Chairman	Address: 10 East 39th Street, 12th Floor	□Vice Chairman	Address: Via dei Pastai, 42
□Director	Office 6	Director	80054 Gragnano (NA)
□President	New York, NY 10016	President	Italy
■ Vice President		□Vice President	7.0 7.0 7.0 7.0 7.0 7.0 7.0 7.0 7.0 7.0
□ Secretary	☐Treasurer	■ Secretary	2020 FDTreasurer
Other	Other	Other	Other
			- II
□Chairman	Name: Luca de Luca	□Chairman	Name: 22
□Vice Chairman	Address: Via dei Pastai, 42	□Vice Chairman	Address: SF 2
Director	80054 Gragnano (NA)	Director	
□President	Italy	□President	
□Vice President		□Vice President	
☐ Secretary	Treasurer	☐ Secretary	Treasurer
□Other	Other	Other	Other
12. The officer or dire	Use an attachment to report more than six (6). The attachment to the index when filing your Florida Department of Director of Signing this document (and who is listed in numberalse information submitted in a document to the Department.	ent of State Annual R or Officer r 11 above) affirms th	eport form. nat the facts stated herein are true and that he or
s.817.155, F.S.			

13. Flavia Garzia, Vice President

(Typed or printed name and capacity of person signing application)

Secretary of The State of Connecticut

I, the Secretary of The State of Connecticut, and keeper of the seal thereof, DO HEREBY CERTIFY, that the certificate of incorporation of

GAROFALO USA, INC.

a domestic STOCK corporation, was filed in this office on September 03, 2008, a certificate of dissolution has not been filed, the corporation has filed all annual reports, and so far as indicated by the records of this office such corporation is in existence.

Secretary of The State of Connecticut

Menk

Date Issued: July 16, 2020

2020 JUL 28 PH 3: 24
SEERHASSEE FROME

Business ID: 0948488 Express Certificate Number: 2020302822001

Note: To verify this certificate, visit the web site http://www.concord.sots.ct.gov