

F20000003781

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

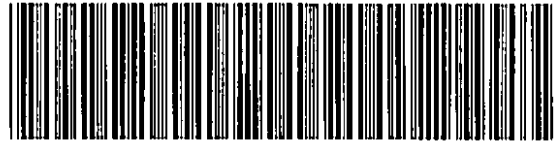
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W20000003781

Office Use Only



200346756762

07/31/20--01023--027 **300.00

06/23/20--01016--006 **70.00

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JUN 22 2020

2020 AUG 28 PM 12:45
FBI - NEW YORK
RECEIVED

AUG 31 2020

M. SOLOMON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Savii, Inc.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Katheryn A. Gettman

Name of Person

Cozen O'Connor

Firm/Company

33 South Sixth Street, Suite 3800

Address

Minneapolis, MN 55402

City/State and Zip code

KGettman@cozen.com

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

For further information concerning this matter, please call:

Michelle Burke

at (612) 260-9012

Name of Person

Area Code

Daytime Telephone Number

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

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

☒ \$70.00 Filing Fee

☐ \$78.75 Filing Fee &
Certificate of Status

☐ \$78.75 Filing Fee &
Certified Copy

☐ \$87.50 Filing Fee,
Certificate of Status &
Certified Copy

SAVII, INC.

Florida Department of State
Division of Corporations

WRITTEN CONSENT GRANTING APPROVAL FOR USE OF NAME

Savii, Inc., a Florida Corporation (the "**Company**"), formed October 17, 2018 under Document Number P18000086796 and voluntarily dissolved on June 15, 2020, does hereby grant permission and approves the filing of the Application By Foreign Corporation for Authorization to Transact Business in Florida of Savii, Inc., a Delaware corporation and does hereby confirm that the Company has no intention of revoking the dissolution.

The undersigned, being the Chief Executive Officer, has executed this Written Consent Granting Approval for Use of Name as of August 11, 2020.

SAVII, INC.

By: 

Name: Ashley Wharton

Title: Chief Executive Officer

2020 AUG 28 PM 12:45
DIVISION OF CORPORATIONS
FLORIDA DEPARTMENT OF STATE

**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. Savii, Inc.
(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. 46-4969565
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 4/7/16 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)
6. August 30, 2018
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 401 E Jackson Street, Suite 3300, Tampa, FL 33602
(Principal office street address)

(Current mailing address, if different)

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

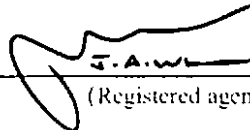
Name: Ashley Wharton

Office Address: 401 E Jackson Street, Suite 3300

Tampa, Florida 33602
(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.



(Registered agent's signature)

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]:

2020 AUG 28 PM 12:45
FILED
CLERK OF THE COURT
TAMPA, FLORIDA

A. DIRECTORS

☒ Chairman Name: Michael Crosthwaite
☐ Vice Chairman Address: Stowe House
St. Chads Road
☒ Director
☐ President Netherstowe, Lichfield UK
☐ Vice President WS13 6TJ
☐ Secretary ☐ Treasurer
☐ Other ☐ Other

☐ Chairman Name: Anthony Tompkins
☐ Vice Chairman Address: Stowe Howe
St. Chads Road
☒ Director
☐ President Netherstowe, Lichfield UK
☐ Vice President WS13 6TJ
☒ Secretary ☐ Treasurer
☒ Other CFO ☐ Other


☐ Chairman Name: Ashley Wharton
☐ Vice Chairman Address: 401 E Jackson Street
Suite 3300
☒ Director
☐ President Tampa, FL 33602
☐ Vice President
☐ Secretary ☐ Treasurer
☒ Other CFO ☐ Other

☐ Chairman Name:
☐ Vice Chairman Address:
☐ Director
☐ President
☐ Vice President
☐ Secretary ☐ Treasurer
☐ Other ☐ Other

☐ Chairman Name:
☐ Vice Chairman Address:
☐ Director
☐ President
☐ Vice President
☐ Secretary ☐ Treasurer
☐ Other ☐ Other

☐ Chairman Name:
☐ Vice Chairman Address:
☐ Director
☐ President
☐ Vice President
☐ Secretary ☐ Treasurer
☐ 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.

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 s.817.155, F.S.

13. Ashley Wharton, Chief Executive Officer
(Typed or printed name and capacity of person signing application)

2020 JUN 28 PM 12:45
1016

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SAVII, INC." 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 NINTH DAY OF JUNE, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

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



6010664 8300

SR# 20205591804

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

A handwritten signature of Jeffrey W. Bullock in black ink, written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Authentication: 203076569

Date: 06-09-20



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 5, 2020

KATHERYN A. GETTMAN
33 SOUTH SIXTH STREET, SUITE 3800
MINNEAPOLIS, MN 55402 US

SUBJECT: SAVII, INC.
Ref. Number: W20000065057

We have received your document for SAVII, INC. . However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Please accept our apology for failing to mention this in our previous letter.

The name designated in your document is unavailable since it is the same as or not distinguishable from the name of a voluntarily dissolved business entity. This name is not available for the assumption or use by another entity for 120 days after the effective date of the dissolution. The dissolved business entity may provide the Department of State with an affidavit or letter, releasing the name for use to you and affirming they have no intention of revoking the dissolution or you may adopt an alternate name for use in Florida. If you choose to adopt an alternate name, please enter that name in the space provided in number one of the application.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Mel Solomon
Senior Section Administrator

Letter Number: 720A00014697

Rec'd
8-28-20



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 25, 2020

KATHERYN A. GETTMAN
33 SOUTH SIXTH STREET, SUITE 3800
MINNEAPOLIS, MN 55402 US

SUBJECT: SAVII, INC.
Ref. Number: W20000065057

We have received your document for SAVII, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 607.1502(4), 617.1502(4) or 605.0904(7), Florida Statutes, this entity is liable for a civil penalty of at least \$500 but not more than \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification. In addition to this civil penalty, the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state are also due. The amount due this office to cover both annual report(s) and penalty fees is \$300.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tacarri K Glass
Regulatory Specialist II

Letter Number: 420A00012592

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JUL 28 2020