F21000003329

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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CORPORATION SERVICE COMPANY
1201 Hays Street
Tallhassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 443141 7144145

AUTHORIZATION :

COST LIMIT : $ 70.00

ORDER DATE : October 1, 2020

ORDER TIME : 4:16 PM

ORDER NO. : 443141-010

CUSTOMER NO: 7144145

FOREIGN FILINGS

NAME: CELYAD ONCOLOGY, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Robinson -- EXT# 62968

EXAMINER: _____

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. Celyad Oncology, 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. Belgium
(State or country under the law of which it is incorporated)

3. _____
(FEI number, if applicable)

4. July 24, 2007
(Date of incorporation)

5. _____
(Date of duration, if other than perpetual)

6. May 23, 2017
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 60 Broad Street, Suite 3502
(Principal office **street** address)

New York, NY 10004
(Current mailing address, if different)

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

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee (City), Florida 32301 (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.

Amanda C. Palmer
(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]:

A. DIRECTORS

☐Chairman Name: Filippo Petti

☐Vice Chairman Address: 60 Broad Street, Ste 3502 New York, New York 10004

☐Director

☐ President

☐Vice President

☐Secretary ☐Treasurer

☒Other Chief Executive Officer ☐Other

☐Chairman Name: Philippe Dechamps

☐Vice Chairman Address: 60 Broad Street, Ste 3502 New York, New York 10004

☐Director

☐President

☐Vice President

☐ Secretary ☐Treasurer

■Other Chief Legal Officer ☐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

☐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. Filippo Petti
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. Filippo Petti, CEO
(Typed or printed name and capacity of person signing application)

LIONBRIDGE

STATE OF NEW YORK)
)
) ss
COUNTY OF NEW YORK)

CERTIFICATION

This is to certify that the attached translation is, to the best of my knowledge and belief, a true and accurate translation from French into English of the attached tax return document for SA Celyad Oncology.

Jeff Cureton, Senior Managing Editor
Lionbridge

Sworn to and subscribed before me
this 28th day of December 2020.

KRISTEN DUFFY
NOTARY PUBLIC-STATE OF NEW YORK
No. 01DU6121852
Qualified in Queens County
My Commission Expires 01-31-2021

Federal Public
Department
FINANCES
COLLECTION AND
RECOVERY

Sender: Infocenter Charleroi
RUE JEAN MONNET 14 BTE 21, 6000 CHARLEROI

SA CELYAD ONCOLOGY
RUE EDOUARD BELIN 2
1435 MONT-SAINT-GUIBERT

Your letter of	Your references	File	Our references	Attachment(s)
		000056521618 891.118.115	AT	1

CHARLEROI, December 14, 2020

TAX RETURN DOCUMENT

Madame, Sir,

I have the honor of sending you, via attachment, the requested document(s).

For optimal processing of your next document request, it is recommended to send it to the department's email address, listed below, specifying the number of documents desired, the reason for the request, and your identification information.

The documents will only be sent to you by mail.

Your documents on MyMinfin! Easy and quick!

Did you know that your documents are also available online? You can download an up-to-date document at any time without having to contact us. It is easy and quick.

Visit MyMinfin:
- Identify yourself via Eid or Itsme (www.itsme.be);
- Click on "My Payments" then select "Certificate of Debt Status";
- Choose your desired language and the kind of document sought;
- Download your document

Does the document indicate that you have debt? Note that you can view the details of these debts under the "pay and be reimbursed" tab. From this overview you can easily pay your debts electronically.

Best regards,

DEBAISIEUX GWENOLA
Collection and Recovery Advisor – Collector

Federal Public
Department
FINANCES
COLLECTION AND
RECOVERY

Infocenter Charleroi
RUE JEAN MONNET 14 BTE 21, 6000 CHARLEROI

TAX RETURN DOCUMENT

Prepared by the INFOCENTER CHARLEROI office, on December 14, 2020

Identification:

NN/Business number: BE0891.118.115
Last name, first name/Denomination: SA CELYAD ONCOLOGY

The undersigned, Collective and Recovery Advisor – Collector, certifies that, according to the information in his possession:

- The taxpayer **owes no amount** in respect of taxes and duties, fines, interest, legal costs, or accessories.

This tax return document is issued for use only in matters of the **Tax Situation**.

It cannot be used under any circumstances:

- In the context of the application of Articles 434 CIR92 [Belgian Income Tax Code 1992] and/or Articles 93ter CTVA [Belgian VAT Code] and 442bis CIR92 and/or 93undecies B CTVA;
- In the context of the application of the Act of January 10, 2010 amending the legislation relating to games of chance (MB of 02.01.2010);
- To obtain an operating license for an online national lottery center;
- To obtain a football license;
- To obtain a license from the Royal Belgian Basketball Federation (FRBB);

DEBAISIEUX GWENOLA
Collection and Recovery Advisor – Collector

Service Public
Fédéral
FINANCES

PERCEPTION
ET RECOUVREMENT

Exp : Infocenter Charleroi
RUE JEAN MONNET 14 BTE 21, 6000 CHARLEROI

SA CELYAD ONCOLOGY
RUE EDOUARD BELIN 2
1435 MONT-SAINT-GUIBERT

votre courrier du	vos références	Dossier	nos références	annexe(s)
		000056521618 891.118.115	AT	1

CHARLEROI, 14 décembre 2020

ATTESTATION FISCALE

Madame, Monsieur,

J'ai l'honneur de vous transmettre, en annexe, l' (les) attestation(s) demandée(s).

Pour un traitement optimal de votre prochaine demande d'attestation, il est recommandé d'envoyer celle-ci à l'adresse e-mail du service, mentionnée ci-dessous, en précisant le nombre d'attestations souhaitées, la raison de la demande et vos données d'identification.

Les attestations vous seront transmises uniquement par pli postal.

Votre attestation sur MyMinfin ! Facile et rapide !

Savez-vous que votre attestation est également disponible en ligne ? A chaque moment vous pouvez télécharger une attestation actualisée sans devoir nous contacter. C'est facile et rapide.

Rendez-vous sur MyMinfin :

- Identifiez-vous par Eid ou Itsme (www.itsme.be);
- cliquez sur « mes paiements » puis sélectionnez « attestation d'état de dettes » ;
- Choisissez la langue souhaitée et le type d'attestation recherchée ;
- Téléchargez votre attestation.

L'attestation indique que vous avez des dettes ? Sachez que vous pouvez consulter le détail de ces dettes sous l'onglet « payer et être remboursé ». A partir de cet aperçu vous pouvez facilement payer vos dettes de manière électronique.

Salutations distinguées,
DEBAISIEUX GWENOLA
Conseiller perception et recouvrement - receveur

Service Public
Fédéral
FINANCES

PERCEPTION
ET RECOUVREMENT

Infocenter Charleroi
RUE JEAN MONNET 14 BTE 21, 6000 CHARLEROI

ATTESTATION FISCALE

établie par le bureau INFOCENTER CHARLEROI , le 14 décembre 2020

Identification :

NN / Numéro d'entreprise : BE0891.118.115
Nom, prénom / Dénomination : SA CELYAD ONCOLOGY

Le soussigné, Conseiller perception et recouvrement - receveur, certifie que, suivant les éléments en sa possession :

- Le redevable **ne doit aucun montant** à titre d'impôt et taxe, amendes, intérêts, frais de poursuites ou accessoires.

La présente attestation fiscale est délivrée pour servir uniquement en matière de **Situation fiscale**

Elle ne peut servir en aucun cas :

- dans le cadre de l'application des articles 434 CIR92 et/ou des articles 93ter CTVA et 442bis CIR92 et/ou 93undecies B CTVA ;
- dans le cadre de l'application de la loi du 10 janvier 2010 portant modification de la législation relative aux jeux de hasard (MB du 01.02.2010) ;
- à l'obtention d'une autorisation d'exploitation d'un centre on-line de la loterie nationale ;
- à l'obtention de la licence pour le football ;
- à l'obtention de la licence de la Fédération Royale Belge de Basket (FRBB) ;

DEBAISIEUX GWENOLA
Conseiller perception et recouvrement - receveur