F21000003805

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Gerimed copies
Considerations to Elling Officer
Special Instructions to Filing Officer:
1021-93768

Office Use Only



900368086339



2021 JUN 25 PM 3: 45

NEONIVED



CORPORATION SERVICE COMPANY
1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT	NO.	:	120000000195

REFERENCE : 880865 7961288

AUTHORIZATION : 1

COST LIMIT : \$\int 70.00

ORDER DATE: June 25, 2021

ORDER TIME : 12:50 PM

ORDER NO. : 880865-005

CUSTOMER NO: 7961288

FOREIGN FILINGS

NAME: OMNIUS US LTD.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland -- EXT# 61592

EXAMINER:



June 28, 2021

CSC

SUBJECT: OMNIUS US LTD. Ref. Number: W21000093368

RESUBMIT

Please give original submission date as file date.
Original All date
6/25/21

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

The use of LIMITED or LTD. is not sufficient as a corporate designation. The name must include a word such as INCORPORATED, INC., CORPORATION or CORP.

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

Suzanne Hawkes Regulatory II

Letter Number: 321A00014706

COVER LETTER

TO:	Registration Sec Division of Corp				
SUBJI	ECT: Omnius U	S Ltd.			
.,		Name of	corporation -	must include suffix	
Dear S	ir or Madam:				
"Certif	icate of Existence		f Good Stand	ing" and check are sub	et Business in Florida," mitted to register the
Please	return all corresp	ondence concerning	g this matter t	o the following:	
Jennife	г Роррег				
			Name of Po	erson	
Hull Sp	eed Associates				
			Firm/Comp	any	
One Bo	ston Place, Suite 2	600			
			Addres	S	· · · · ·
Boston,	MA 02108				
		(City/State and	l Zip code	
jen.pop	per@hullspeedasso				
		E-mail address: (to be used for	r future annual report n	otification)
For fur	ther information o	concerning this mat	ter, please cal	1:	
Jennife	r Popper	at	617	997-2002	
	Name of Persor		Area Code	Daytime Teleph	none Number
	Registration Sec Division of Corp The Centre of Ta	oorations allahassee Street, Suite 810		MAILING Al Registration So Division of Co P.O. Box 6327 Tallahassee. F	ection orporations
Please n		to: FLORIDA DEP \$78.75 Filing & Certificate of \$	ARTMENT C	OF STATE \$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee. Certificate of Status & Certified Copy

COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT: Omnius US Ltd.					
	Name of corporation - must include suffix				
Dear Sir or Madam:					
	ion for Authorization to Transact Business in Florida," od Standing" and check are submitted to register the business in Florida.				
Please return all correspondence concerning this	s matter to the following:				
Jennifer Popper					
N:	ame of Person				
Hull Speed Associates					
Fir	m/Company				
One Boston Place, Suite 2600					
	Address				
Boston, MA 02108					
City/	State and Zip code				
jen.popper@hullspeedassociates.com					
E-mail address: (to be	e used for future annual report notification)				
For further information concerning this matter, p	please call:				
Jennifer Popper at (61	7 997-2002				
Name of Person Ar	ea 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 \$\Begin{array}{c} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \					

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.

"Inc.," "Co.," "C	orp," "Inc," "Co," or "Corp.")			
Omnius US Ltd	d. Co.			
(If name unavail	able in Florida, enter alternate corporate nam		g business in Florida)	
Delaware	4	3		
	y under the law of which it is incorporated)	(FEI number, if app	olicable)	
02/15/2018	4	5.		
(Date of incorporation)		(Date of duration, if other than perpetual)		
July 1, 2021				
•		in Florida, if prior to registration) 1502, F.S., to determine penalty liability	y)	
One Boston Place	e, Suite 2600, Boston, MA 02108			
*		ffice street address)		
	(Current mail	ing address, if different)	201 SE	
			12 20	
. Name and stree	et address of Florida registered agent: (P	.O. Box NOT acceptable)		
Name:	Corporation Service Company		25	
	1201 Hays Street			
Office Address:	Tallahassee		2021 JUN 25 PM 4: 3 SEVERTANCE SEELFL	
	(City)	, Florida (Zip code)	, IE 32	
	` , ,,	, , ,		
	ent's acceptance: led as registered agent and to accept serv	vice of process for the above stated	corporation at the pla	
	application, I hereby accept the appoint			
	omply with the provisions of all statutes		e performance of my d	
na 1 am jamular	with and accept the obligations of my p	озиюн из гедізісгей адені.		
C	Corporation Service Company			
	y: (Ucapi) Willat assisten va prosecus	ı t		
	(Registered agent's			

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.

A. DIRECTORS				
□ Chairman	Martin Micko Name:	□ Chairman	Name: Sofie Quidenus- Wahlforss	
□Vice Chairman	One Boston Place, Suite 2600	□Vice Chairman	Address: One Boston Place, Suite 2600	
Director	Boston, MA 02108	□Director	Boston, MA 02108	
□President		President		
□Vice President		□Vice President		
Secretary	□Treasurer	Secretary	Treasurer	
Other COO	Other	□Other	□Other	
□ Chairman □ Vice Chairman □ Director □ President □ Vice President □ Secretary ■ Other	Stephan Dorfmeister Address: Boston, MA 02108 ☐ Treasurer ☐ Other	□Chairman □Vice Chairman □Director □President □Vice President ■Secretary □Other	Suite 1000 Chicago, IL 60606	
□ Chairman	Name:	□Chairman	Jennifer Popper	
□Vice Chairman	Address: One Boston Place, Suite 2600	□Vice Chairman	Address: One Boston Place, Suite 2600	
□Director	Boston, MA 02108	Director	Boston, MA 02108	
□President		□President		
□Vice President		□Vice President		
☐ Secretary	□Treasurer	☐ Secretary	Treasurer	
Other Assistant	Secretar Other	Other Assistant	Secretar 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. Jennifer Popper (Typed or printed name and capacity of person signing application)				
	(Typed or printed name and capacity of person	a signing application)	1	



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

DELAWARE, DO HEREBY CERTIFY "OMNIUS US LTD." 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 TWENTY-FIFTH DAY OF JUNE, A.D. 2021.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "OMNIUS US LTD."

WAS INCORPORATED ON THE FIFTH DAY OF FEBRUARY, A.D. 2018.

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



Authentication: 203535933

Date: 06-25-21