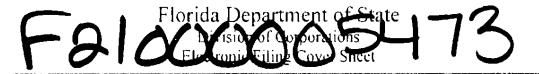
From: Kimberly Laughrey

9/23/21, 12:26 PM

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000357178 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA0000000023 Phone : (614)280-3338 : (954)208-0845 Fax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

## FOREIGN PROFIT/NONPROFIT CORPORATION

## Rhomberg Sersa USA, Inc.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu

Help

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

	"TELL STORAGE ATELL "INCOMPARE ATELL"	"COMPANY," "CORPORATION,"	
Enter name of co 'Inc.," "Co" "Co	rp," "Inc." "Co," or "Corp.")		
·			
f name unavaila	ble in Florida, enter alternate corporate name a	dopted for the purpose of transacting business	s in Florida)
	3 under the law of which it is incorporated)	(FEI number, if applicable)	
(State or country	under the law of which it is the offwared)	•	
377017. 2021	of incorporation) 5.	(1) (6) Landing If only a then perm	emul)
(Date	of incorporation)	(Date of duration, if other than perp	ctuary
	(Date first transacted business in	Florida, if prior to registration)	
	(SEE SECTIONS 607.1501 & 607.15 r Boulevard, Suite 550, Fleming Island, FL 32	02, F.S., to determine penalty liability)	
845 Town Cente	r Houlevard, Suite 330, Flething Island, 77, 32		
	(Princip	al office address)	
	(Princip	al office address)	
	(Princip	al office address)	
	(Princip	al office address)	
	(Princip	al office address) g address, if different)	
	(Princip (Current mailin at address of Florida registered agent: (P.C	al office address) g address, if different)	
Name and <u>stre</u> t	(Princip (Current mailing) (Current mailing) (Current mailing) (Address of Florida registered agent: (P.C.)	al office address)  g address, if different)  D. Box NOT acceptable)	275 SS
	(Princip (Current mailing) (Current mailing) (Current mailing) (Current mailing) (P.C) (Carporation System) (P.C) (P.C) (P.C) (Princip	al office address)  g address, if different)  D. Box NOT acceptable)	
Name and <u>stre</u> t	(Princip (Current mailin at address of Florida registered agent: (P.C CT Corporation System 1200 South Pine Island Road	al office address)  g address, if different)  D. Box NOT acceptable)	25/5- 23
Name and <u>stre</u> t Name:	(Princip (Current mailin at address of Florida registered agent: (P.C CT Corporation System 1200 South Pine Island Road	al office address)  g address, if different)  D. Box NOT acceptable)	25/5- 23
Name and <u>stre</u> t Name:	(Princip (Current mailin at address of Florida registered agent: (P.C CT Corporation System 1200 South Pine Island Road	al office address)  g address, if different)  D. Box NOT acceptable)	25/5- 23
Name and <u>stree</u> Name:	(Princip (Current mailing) (Current mailing) (Current mailing) (Current mailing) (P.C) (Carporation System) (P.C) (P.C) (P.C) (Princip	al office address)  g address, if different)  D. Box NOT acceptable)	275 SS
Name and <u>stree</u> Name: Tee Address:	(Current mailing the address of Florida registered agent: (P.C. C.T. Corporation System)  1200 South Pine Island Road  Plantation  (City)	g address, if different)  D. Box NOT acceptable) , Florida 33324  (Zip code)	2821SF 23 F1112:06
Name and <u>stree</u> Name: Tee Address: Registered ag	(Current mailing the address of Florida registered agent: (P.C. C.T. Corporation System)  1200 South Pine Island Road  Plantation  (City)  ent's acceptance:	g address, if different)  D. Box NOT acceptable) , Florida 33324  (Zip code)	2\$21 S - 23
Name and <u>stree</u> Name: Tee Address: Registered ag	(Current mailing the address of Florida registered agent: (P.C. C.T. Corporation System)  1200 South Pine Island Road  Plantation  (City)  ent's acceptance:  red as registered agent and to accept serve the appoint.	al office address)  g address, if different)  D. Box NOT acceptable) , Florida	ration at the plus in this capacity
Name and stree Name: Tee Address: Registered ag ving been name signated in this	(Current mailing the address of Florida registered agent: (P.C. C.T. Corporation System)  1200 South Pine Island Road  Plantation  (City)  ent's acceptance:  It application, I hereby accept the appointment of the provisions of all statutes in the provisions of all statutes.	al office address)  g address, if different)  D. Box NOT acceptable) , Florida , Florida  (Zip code)  ice of process for the above stated corpoment as registered agent and agree to acceptable to the proper and complete perfections.	ration at the plus in this capacity
Name and stree Name: Tice Address: Registered agoving been namesignated in this	(Current mailing the address of Florida registered agent: (P.C. C.T. Corporation System)  1200 South Pine Island Road  Plantation  (City)  ent's acceptance:  red as registered agent and to accept serve the appoint.	al office address)  g address, if different)  D. Box NOT acceptable) , Florida , Florida  (Zip code)  ice of process for the above stated corpoment as registered agent and agree to acceptable to the proper and complete perfections.	ration at the plus in this capacity
Name and street Name: fice Address: Registered agreeing been nan signated in this ther agree to a	(Current mailing the address of Florida registered agent: (P.C. C.T. Corporation System)  1200 South Pine Island Road  Plantation  (City)  ent's acceptance: the description of accept serve to application, I hereby accept the appointmental to accept with the provisions of all statutes of amiliar with and accept the obligations of amiliar with and accept the obligations of all statutes of amiliar with and accept the obligations of all statutes of amiliar with and accept the obligations of all statutes of amiliar with and accept the obligations of all statutes of amiliar with and accept the obligations of all statutes of an accept the obligations of all statutes of a server accept the obligations of all statutes of a server accept the obligations of all server accept the obligations of all server accept the obligations of all server accept and accept the obligations of all server accept a	g address, if different)  D. Box NOT acceptable) , Florida	ration at the plus in this capacity
Name and street Name: Tice Address: Registered agreeing been names ignated in this other agree to other agrees and I am	(Current mailing the address of Florida registered agent: (P.C. C.T. Corporation System)  1200 South Pine Island Road  Plantation  (City)  ent's acceptance:  the day registered agent and to accept serve application, I hereby accept the appointment of the appointment of the appointment of the accept with the provisions of all statutes of amiliar with and accept the obligations of	g address, if different)  D. Box NOT acceptable) , Florida	ration at the plus in this capacity

From; Kimberly Laughrey

## 1). Names and business addresses of officers and/or directors: A. DIRECTORS Michael Match Chairman: 1845 Town Center Boulevard, Suite 550, Fleming Island, FL 32003 Address: \_\_\_\_\_ Vice Chairman: Address: \_\_\_ Director: Address: Director: B. OFFICERS Michael Match President: 1845 Town Center Boulevard, Suite 550, Fleming Island, FL 32003 Address: Vice President: Michael Match Secretary: 1845 Town Center Boulevard, Suite 550, Fleming Island, FL 32003 Address: \_\_ Dominik Arnold Treasurer: 1845 Town Center Boulevard, Suite 550, Fleming Island, FL 32003 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Signature of Director or Officer

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

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.

Dominik Arnold, Treasurer



Page 1

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

DELAWARE, DO HEREBY CERTIFY "RHOMBERG SERSA USA, 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 SIXTEENTH DAY OF SEPTEMBER, A.D.

2021.

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

e at corn de la wate gov/auth

Authentication: 204172107

Date: 09-16-21