## F22000003398

| (Requestor's Name)      |                   |             |  |  |
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| (Cit                    | y/State/Zip/Phone | : #)        |  |  |
| PICK-UP                 | MAIT              | MAIL        |  |  |
| (Bu                     | siness Entity Nam | ne)         |  |  |
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SECRETARY OF STATE LLAHASSEE, FLORID,

FILED

## **COVER LETTER**

| TO: Registration Section Division of Corporations  |   |
|--|---|
| SUBJECT: The Foldie, Inc.  |   |
|  | ration - must include suffix  |
| Dear Sir or Madam:   |   |
|  | n for Authorization to Transact Business in Florida," I Standing" and check are submitted to register the usiness in Florida. |
| Please return all correspondence concerning this n   | natter to the following:  |
| Abby Riegler   |   |
| Nan  | ne of Person  |
| Thorelli & Associates  |   |
| Firm   | /Company  |
| 70 W. Madison St., Suite 5750  |   |
|  | Address   |
| Chicago, IL 60602  |   |
| City/S   | tate and Zip code   |
| abby@thorelli.com  |   |
| E-mail address: (to be t   | used for future annual report notification)   |
| For further information concerning this matter, ple  | ease call:  |
| Abby Riegler at ( 312  | 357-0300  |
| 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:<br>Registration Section<br>Division of Corporations<br>P.O. Box 6327<br>Tallahassee, FL 32314                |
| Enclosed is a check for the following amount:  Please make check payable to: FLORIDA DEPARTM  \$70.00 Filing Fee  \$78.75 Filing Fee & Certificate of Status | IENT OF STATE  ■ \$78.75 Filing Fee & □ \$87.50 Filing Fee, Certified Copy Certificate of Status & 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.

| The Foldie, Inc. 1.                    |   |   |                          |  |
|--|---|---|--------------------------|--|
|  | orporation: must include "INCORPORATED," "Corp." "Inc." "Co." or "Corp.")   | COMPANY." "CORPORATIO                       | N."                      |  |
| (If name unavail                       | lable in Florida, enter alternate corporate name ad-  | opted for the purpose of transact           | ing business in Florida) |  |
| 2                                      | 3   |   |                          |  |
| March 25, 2022                         |   | (FEI number, if applicable)                 |                          |  |
| (Date                                  | of incorporation)   | (Date of duration, if other than perpetual) |                          |  |
| 6.                                     |   |   |                          |  |
|  | (Date first transacted business in FloSEE SECTIONS 607,1501 & 607,1502.)  |   |                          |  |
| <del>-</del>                           | t., Suite 5750, Chicago, IL 60602   |   |                          |  |
| <del>-</del>                           | t., Suite 5750, Chicago, IL 60602   | office address)                             |                          |  |
| <del>-</del>                           | t., Suite 5750, Chicago, II, 60602 (Principal o   |   | TALLATIA                 |  |
| 7                                      | t., Suite 5750, Chicago, II, 60602 (Principal o   | office address) ddress, if different)       | 2022 APR - T             |  |
| 7<br>8. Name and <u>stree</u><br>Name: | t., Suite 5750, Chicago, II, 60602  (Principal of Current mailing a et address of Florida registered agent: (P.O. F                         | office address) ddress, if different)       | 2022 APR                 |  |
| 7<br>8. Name and stree                 | (Principal of Current mailing a et address of Florida registered agent: (P.O. F. Corporation Service Company  1201 Hays Street  Tallahassee | office address) ddress, if different)       | 2022 APR - T             |  |

## 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.

| Rob Branch | Rob Branch, Asst. Secretary    |
|------------|--------------------------------|
|            | (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.

| A. DIRECTORS   |   |                        |                                  |                           |
|--|---|------------------------|----------------------------------|---------------------------|
| □Chairman  | Name: Thomas Van den Heuvel   | □Chairman              | Name: Svéa Astrid Van den Heuvel |                           |
| □Vice Chairman   | Address:  | □Vice Chairman         | Address: Gens                    | tberg 8 in,               |
| Director   | App 0101, 1652 Alsemberg.   | ■Director              | ■Director 1652 Alsemberg,        |                           |
| President  | Belgium   | □President             | Belgium                          |                           |
| □Vice President  |   | □Vice President        |                                  |                           |
| □Secretary   | ☐Treasurer  | ■ Secretary            |                                  | <b>■</b> Treasurer        |
| □Other   | Other   | Other                  |                                  | □Other                    |
| □Chairman  | Name:   | □Chairman              | Name:                            |                           |
| □Vice Chairman   | Address:  | □Vice Chairman         | Address:                         |                           |
| □Director  |   | □Director              |                                  |                           |
| □President   |   | □President             |                                  |                           |
| □Vice President  |   | □Vice President        |                                  |                           |
| □Secretary   | □Treasurer  | □ Secretary            |                                  | ☐Treasurer                |
| □Other   | Other   | □Other                 |                                  | □Other                    |
| □Chairman  | Name:   | □Chairman              | Name:                            |                           |
| □Vice Chairman   | Address:  | □Vice Chairman         |                                  |                           |
| □Director  |   | □Director              |                                  |                           |
| □President   |   | □President             |                                  |                           |
| □Vice President  |   | □Vice President        |                                  |                           |
| ☐ Secretary  | □Treasurer  | □Secretary             |                                  | ☐Treasurer                |
| □Other   | Other   | □Other                 |                                  | □Other                    |
| individuals may be   | Use an attachment to report more than six (6). The attace added to the index when filing your Florida Department                                | nt-of State Annual Re  |                                  | irposes only. Non-indexed |
| 12.  | Signature of Director o   | r Officer              |                                  |                           |
| The officer or direction is aware that fit s.817.155. F.S. | ctor signing this document (and who is listed in number<br>also information submitted in a document to the Departs<br>of den Heuvel - President | r 11 above) affirms th |                                  |                           |

<u>Delaware</u>

Page 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "THE FOLDIE, 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 TWENTY-FIFTH DAY OF MARCH, A.D. 2022.

Authentication: 203011658

Date: 03-25-22

6697684 8300 SR# 20221160298

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