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| (Requestor's Name) |
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| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: Gain & Co.

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:

| Amber Guzman | | | | | | 101 |
|--|---|------------|--|--------------------------|--|-------------|
| | Name o | of Person | <u> </u> | <u></u> | | |
| Martensen Wright PC | | | | | | 2022 1.11 3 |
| | Firm/Co | mpany | | | <u> </u> | |
| On Conduct Mult Protoc (70 | | | | | | Pit |
| One Capitol Mall, Suite 670 | . | | | | | |
| | Add | fress | | | •. | |
| Sacramento, CA 95814 | | | | | | 0 |
| | City/State | and Zip | code | | · · · · | <u>-</u> |
| ag@usa-eurolaw.com | | | | | | |
| E-mail a | ddress: (to be used | l for futu | re annual report | notifica | ition) | <u></u> . |
| For further information concerning Amber Guzman | this matter, please at (⁹¹⁶ | | -9088 | | | |
| Name of Person | Area Co | ode | Daytime Telep | phone M | lumber | _ |
| STREET/COURIER ADI Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Su Tallahassee, F1, 32303 | | | MAILING A Registration 5 Division of C P.O. Box 632 Tallahassee, I | Section lorpora 27 | tions | |
| e | ng amount: DA DEPARTMEN 5 Filing Fee & Teate of Status | 🗎 \$78.7 | ATE 5 Filing Fee & fied Copy | | \$87.50 Fili Certificate Certified C | of Status & |

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.

Gain & Co. 1. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co." or "Corp.")

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Gain & Co. Florida, Inc.

| Dalaria | Q, | 7 2186210 | | | |
|--------------------------------|--|---|--|--|--|
| Delaware | $\frac{8}{3}$ y under the law of which it is incorporated) | | | | |
| (State or countr | y under the law of which it is incorporated) | (FEI number, if applicable) | | | |
| October 13, 202 | 1 5. | | | | |
| (Date | of incorporation) | 5 (Date of duration, if other than perpetual) | | | |
| | | | | | |
| | (Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1502 | | | | |
| 515 North State 5 | Street, Floor 15, Chicago, IL 60654 | | | | |
| | (Principal office | street address) | | | |
| c/o Martensen W | right PC, One Capitol Mall. Suite 670, Sacramen | address, if different) | | | |
| | (Current mailing a | address, if different) | | | |
| Name and <u>stree</u> Name: | et address of Florida registered agent: (P.O. Corporation Service Company | c c | | | |
| ffice Address: | 1201 Hays Street | | | | |
| | Tallahassee | . Florida 32301 | | | |
| | (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.

By: Corporation Service Company

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 | Soren Hagensen Peters Name: | E)Chairman | Lasse Borup Andersen Name: | | |
| □Vice Chairman | 515 North State Street, Floor 15 Address: | 🗆 Vice Chairman | Address: | | |
| Director | Chicago, II. 60654 | Director | Chicago, IL 60654 | | |
| President | | President | | | |
| DVice President | | □Vice President | | | |
| Secretary | Treasurer | | Treasurer | | |
| DOther | Other | Other | Other | | |
| | Name: | Chuirman | Stine Blichfeldt Kjær Tarborg | | |
| □Chairman | Martensen Wright PC | | Dirch Passers Allé 27, 5, | | |
| □Vice Chairman □Director | One Capitol Mall, Suite 670 | □Vice Chairman | 2000 Frederiksberg, Denmark | | |
| | Sacramento, CA 95814 | | | | |
| | | □Vice President | | | |
| Secretary | Treasurer | □ Secretary | | | |
| ⊡0ther | Other | □Other | · · · · · · | | |
| - | | | 3 | | |
| ⊡Chairman | Name: | ⊡Chairman | Niune: | | |
| □Vice Chairman | Address: | □Vice Chairman | Aduress: | | |
| Director | | Director | | | |
| □President | | □President | | | |
| □Vice President | | □Vice President | | | |
| DSecretary | Treasurer | Secretary | | | |
| Other | □Other | □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.

Edward Signature of Director or Officer 12.

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 \$817,155, F.S.

13. Edward J. Wright, Jr., Corporate Secretary



The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "GAIN & CO." 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 FOURTEENTH DAY OF APRIL, A.D. 2022.

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Jeffrey W, Butlock, Secretary of Slate

Authentication: 203187761

Date: 04-14-22

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SR# 20221447515 You may verify this certificate online at corp.delaware.gov/authver.shtml



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 18, 2022

AMBER GUZMAN ONE CAPITAL MALL STE 670 SACRAMENTO, CA 95814 US

SUBJECT: GAIN & CO Ref. Number: W22000065251

We have received your document for GAIN & CO and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company, "Corporation," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

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) 245-6051.

Sharon D Franklin Regulatory Specialist II

Letter Number: 122A00011400

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