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JUL 22 2022 M. SOLOMON

COVER LETTER

TO: **Registration Section** Division of Corporations

SUBJECT: SENSEDIA. INC.

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:

Michel de Amorim

	Name of Pers	on		_	
Drummond Consulting LLC					63
	Firm/Compan	y		7	2922
601 Brickell Key Drive, Suite 901				#	JUL,
	Address		<u></u>	-	·
Miami, FL 33131					ω .
	City/State and Z	lip code	<u> </u>	—	лт
compliance@drummondadvisors.com				-	ð ú
E-mail addre	ss: (to be used for f	uture annual report i	notification)		. . 8
Michel de Amorim Name of Person	at (<u>)</u> Area Code)	770-0005 Daytime Telep	hone Number		
STREET/COURIER ADDRE Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 8 Tallahassee, FL 32303		MAILING A Registration 5 Division of C P.O. Box 632 Tallahassee, I	Section orporations 7		
Enclosed is a check for the following an Please make check payable to: FLORIDA 1		LIVEN A VENEN			

Certified Copy

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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.

t	SENSEDIA,	INC.

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

DELAWARE	3			
(State or countr	y under the law of which it is incorporated)	(FEI number, if applicable)		
09/30/2008	5.			
(Date	of incorporation)	(Date of duration, if other than perpetual)		
	(Date first transacted business in FI (SEE SECTIONS 607.1501 & 607.1502			
251 Little Falls f	rive, Wilmington, New Castle, Delaware, 19808	, ras, to determine penany nationaly		
	(Principal office	street address)		
601 Brickell Key	Drive, Suite 901 Miami, FL 33131	<u>Meet</u> addressy	* ^	23
		iddress, if different)	·	1835
				۲. ۲.
Name and stree	at address of Florida registered agent: (P.O. E	Box <u>NOT</u> acceptable)		
. ,	Drummond Consulting LLC			5
Name:			•	8 h :01 HY
	601 Brickell Key Drive, Suite 901	``		.
ffice Address:		<u> </u>		
ffice Address:	Miami	 . Florida ³³¹³¹		եե

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.

Tel blan

(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. DIRECTOR	(S)
-------------	-----

🗆 Chairman	Kleber Bacili Name:	□ Chairman	Name: Fernand	o Matt			
🗇 Vice Chairman	251 Little Falls Drive, Address:	⊡Vice Chairman	Address: 251 I.	ittle Falls Di	rive.		
Director	Wilmington, New Castle, Delaware,	Director	Wilmington, N	šew Castle, ľ	Delawar	e,	
🛱 President	19808	President	19808				
□Vice President		□Vice President					
Secretary	[] Treasurer	DSecretary		⊡Treasurer			
Other		⊡0ther		□Other			
□Chairman □Vice Chairman	Name: <u>Marcilio Oliveira</u> Name: <u>251 Little Falls Drive</u> ,	□Chairman □Vice Chairman	Name:				
Director	Wilmington, New Castle, Delaware,						
	19808						
□Vice President		□Vice President					
Secretary	Treasurer	Secretary		DTreasurer		252	
DOther		Other		□Other			
	N		N			13	ـــ مــ ۳۰۰۰ آر ۱۹۰۰ م
⊡Chairman	Name:	□Chuirman	Name:		····		. , . .
Director	Address:	□Vice Chairman	Address:			81 :OI	
□President		□President			-		
□Vice President		□Vice President					
DSecretary	Treasurer	Secretary		⊡Treasurer			
□0ther	[]Other	□Other		⊡Other			

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 talse 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. Kleber Rogerio Bacili, President



Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SENSEDIA, 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 TENTH DAY OF JUNE, A.D. 2022.



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4606837 8300 SR# 20222680937 You may verify this certificate online at corp.delaware.gov/authver.shtml

ch, Secretary O

Authentication: 203650593 Date: 06-10-22