# 120000048

(Re	questor's Name)			
(Address)				
(Address)				
(Cıt	ry/State/Zip/Phone	#)		
PICK-UP	MAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer				
	<u> </u>			

Office Use Only



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RECEIVED

2022 JUL 25 FH 12: 58

K. SALY AUG - 3 2022 CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195 REFERENCE: 830907 4807453 AUTHORIZATION : COST LIMIT : ORDER DATE : July 22, 2022 ORDER TIME : 9:36 AM ORDER NO. : 830907-020 CUSTOMER NO: 4807453 FOREIGN FILINGS NAME: KATALINA HOLDING COMPANY XXXX QUALIFICATION (TYPE: <u>LL</u>) PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: XX \_\_\_ CERTIFIED COPY \_\_\_\_\_ PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

EXAMINER:

CONTACT PERSON: Eyliena Baker -- EXT#



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

July 26, 2022

CSC

SUBJECT: KATALINA HOLDING COMPANY

Ref. Number: W22000097529

Please give original of 125/21 le date.

We have received your document for KATALINA HOLDING COMPANY 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.

The document number of the name conflict is L11000108654.

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: 322A00016700

#### **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Katalina Holding Company	
	n - must include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for "Certificate of Existence," or "Certificate of Good Sta above referenced foreign corporation to transact busing	inding" and check are submitted to register the
Please return all correspondence concerning this matter	er to the following:
Timothy J. Gallagher, Paralegal	
Name o	f Person
Shartsis Friese LLP	
Firm/Co	пралу
One Maritime Plaza, 18th Floor	
Add	ress
San Francisco, CA 94111	
City/State	and Zip code
tgallagher@sflaw.com	
E-mail address: (to be used	for future annual report notification)
For further information concerning this matter, please	call:
Timothy J Gallagher at (415	421-6055 Ext. 362
Name of Person Area Co	de 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 DEPARTMEN  \$70.00 Filing Fee  \$78.75 Filing Fee & Certificate of Status	T 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.

	orporation; must include "INCORPORATED orp," "Inc," "Co," or "Corp.")	," "COMPANY," "CORPORATION,"	
KATALINA HO	DLDING COMPANY (FERMENTED FO	ODS)	
(If name unavails	able in Florida, enter alternate corporate name	adopted for the purpose of transacting business in Florida)	-
2. Delaware	3.	63-0188817	
	y under the law of which it is incorporated)	(FEI number, if applicable)	_
4. 12/02/2021	5.	Perpetual	
(Date	of incorporation)	(Date of duration, if other than perpetual)	-
6. N/A			
		in Florida, if prior to registration) 502, F.S., to determine penalty liability)	
200 S. Biscavne I	(SEE SECTIONS 607.1301 & 607.1 Blvd., Suite 4620, Miami, FL 33131	502, F.S., to determine penanty nationally	
7		fice street address)	-
	(, , , , , , , , , , , , , , , , , , ,	<u> </u>	
	(Current maili	ng address, if different)	7099
			2 7
8. Name and street	et address of Florida registered agent: (P.	O. Box NOT acceptable)	
Name:	Corporation Service Company		FILE DATE: 50
Office Address:	1201 Hays Street	ابرة بريا	PH TO
	Tallahassee	, Florida	55. 05
	(City)	(Zip code)	5, 0
designated in this	ed as registered agent and to accept serv application, I hereby accept the appoint omply with the provisions of all statutes	ice of process for the above stated corporation at the ment as registered agent and agree to act in this capa relative to the proper and complete performance of m osition as registered agent.	icity. I

•

Corporation Service Company Ey Live Bahar By:

Assistant Vice President

(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	Oliver R. Joost		Name:
☐Chairman	Name:	☐ Chairman	Name:
□Vice Chairman	Address: 200 S. Biscayne Blvd.	□Vice Chairman	Address:
Director	Suite 4620	Director	Miami, FL 33131
President	Miami, FL 33131	President	
□Vice President	Co- President	□Vice President	Co-President
Secretary	Treasurer	□ Secretary	□Treasurer
Other	Other	Other	Other
Chairman	Ed Hicks	□Chuirman	Name:
	Address: 200 S. Biscayne Blvd.	□Vice Chairman	Address:
	Suite 4620	Director	Suite 4620
☐ Director	Miami, FL 33131	☐President	Miami, FL 33131
		□ Vice President	- SS
Secretary	Treusurer	Secretary	■Treasurer
□Other	Other	Other	Other
□ Chairman	Jorge Azevedo	□Chairman	T. Bruce Taylor
	200 S. Biscayne Blvd.	□Vice Chainnan	Address: 200 S. Biscayne Blvd.
	Suite 4620	Director	Suite 4620
□Director	Miami, FL 33131	□President	Miami, FL 33131
□President		□Vice President	
	□'l'reasurer	Secretary	☐ Treasurer
☐ Secretary  Chief O	perating Officer	Other	
Important Notice; individuals may b	Use an attachment to report more than six (6). The added to the index when filing your Florida Department	ctor or Officer	that the facts stated herein are true and that he or
s.817.155, F.S.	oost, Co- President	-	
13	(Typed or printed name and capacity of	person signing application	n)

#9280003

## Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "KATALINA HOLDING COMPANY" 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 EIGHTEENTH DAY OF JULY, A.D. 2022.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "KATALINA HOLDING COMPANY" WAS INCORPORATED ON THE SECOND DAY OF DECEMBER, A.D. 2021.

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



6438058 8300

Authentication: 203944056

Date: 07-18-22