

F220000007074

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

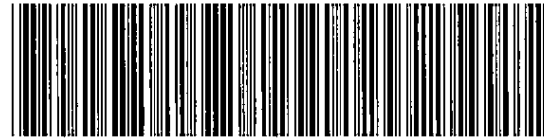
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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2022 NOV 15 AM 9:01

RECEIVED

2022 NOV 15 PM 2:16

ALLAHASSEE, FLORIDA

S. ROBERTS

NOV 15 2022



CSC - Tallahassee
1201 Hays Street
Tallahassee, FL 32301-2607
850-558-1500, Ext: 61594

To: Department Of State, Division Of Corporations
From: Eyliena Baker
Ext:
Date: 11/15/22
Order #: 135832-1
Re: TATA CONSUMER PRODUCTS U.S. HOLDINGS, INC.
Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Application for Certificate of Authority

Amount to be deducted from our State Account: \$70.00 - FL State Account Number:
120000000195

AUTHORIZATION:

A handwritten signature in black ink, appearing to read "Eyliena Baker", is written over the word "AUTHORIZATION".

Please take the following action:

File in your office on basis

Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Tata Consumer Products U.S. Holdings, 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:

Jennifer Hart

Name of Person

Tata Consumer Products U.S. Holdings, Inc.

Firm/Company

155 Chestnut Ridge Road

Address

Montvale, New Jersey 07645

City/State and Zip code

breda.singh@tataconsumer.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jennifer Hart

at (203) 644-7103

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:

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 DEPARTMENT OF STATE**

☐ \$70.00 Filing Fee

☐ \$78.75 Filing Fee &
Certificate of Status

☐ \$78.75 Filing Fee &
Certified Copy

☐ \$87.50 Filing Fee,
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.*

1. Tata Consumer Products U.S. Holdings, Inc.

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

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Delaware 3. 22-3387784

(State or country under the law of which it is incorporated)

(FEI number, if applicable)

4. 6/9/1995

5.

(Date of incorporation)

(Date of duration, if other than perpetual)

6. _____

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 155 Chestnut Ridge Road, 2nd Floor, Montvale, New Jersey 076451

(Principal office street address)

(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Corporation Service Company

Office 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.

Corporation Service Company

By: 

(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]:

2022 NOV 15 AM 9:01

A. DIRECTORS

☐ Chairman Name: Susan Dondero

☐ Vice Chairman Address: c/o TCP US Holdings, Inc.

☒ Director 155 Chestnut Ridge Road, 2nd Floor

☐ President Montvale, New Jersey 07645

☒ Vice President _____

☐ Secretary ☒ Treasurer

☐ Other _____ ☐ Other _____

☐ Chairman Name: Gharry Eccles

☐ Vice Chairman Address: c/o TCP UK Group Ltd.

☒ Director 325 Oldfield Lane North

☐ President Greenford, Middlesex, UB60AZ

☐ Vice President England

☐ Secretary ☐ Treasurer

☐ Other _____ ☐ Other _____

☐ Chairman Name: Lakshmanan Krishna Kumar

☐ Vice Chairman Address: c/o TCP Ltd.

☒ Director 11/13, Botawala Building 1st Floor

☐ President Office Nos, 2 to 6, Horniman Circle

☐ Vice President Fort Mumbai 400001 India

☐ Secretary ☐ Treasurer

☐ Other _____ ☐ Other _____

☐ Chairman Name: Monica Jain

☐ Vice Chairman Address: c/o TCP US Holdings, Inc.

☒ Director 155 Chestnut Ridge Road, 2nd Floor

☐ President Montvale, New Jersey 07645

☐ Vice President _____

☐ Secretary ☐ Treasurer

☒ Other Senior VP ☒ Other General Manager

☐ Chairman Name: _____

☐ Vice Chairman Address: _____

☐ Director _____

☐ President _____

☐ Vice President _____

☐ Secretary ☐ Treasurer

☒ Other _____ ☐ Other _____

☐ Chairman Name: Jennifer Hart

☐ Vice Chairman Address: c/o TCP US Holdings, Inc.

☐ Director 155 Chestnut Ridge Road, 2nd Floor

☐ President Montvale, New Jersey 07645

☒ Vice President _____

☒ Secretary ☐ Treasurer

☒ Other General Counsel ☐ 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.

12. Jennifer Hart
Signature of Director or Officer

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.

13. Jennifer Hart - Vice President, General Counsel & Secretary

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

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TATA CONSUMER PRODUCTS US HOLDINGS, 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 FIFTEENTH DAY OF NOVEMBER, 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 "TATA CONSUMER PRODUCTS US HOLDINGS, INC." WAS INCORPORATED ON THE NINTH DAY OF JUNE, A.D. 1995.

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



2514302 8300

SR# 20224022261

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

A handwritten signature in black ink, appearing to read "JB", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Authentication: 204860503

Date: 11-15-22