F23000000134

(Requestor's Name)
(Address)
(Adcress)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
:: fied Copies Certificates of Status
pecial Instructions to Filing Officer:

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Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312 (850) 656-4724

DATE <u>01/06/2023</u>		**WALK IN**		
ENTITY NAME OLE	EA COLLECTION INC			
DOCUMENT NUMBI	ER			
	PLEASE FILE T	THE ATTACHED AND RETURN		
xxxxx	Plain Copy			
	Certified Copy			
	Certificate of Status			
	PLEASE OBTAIN THE	FOLLOWING FOR THE ABOVE ENTITY		
	Certified Copy of Arts			
	- ,, -	s & Amendments Complete File (Including Annual Reports)		
Certificate of Status				
	Certificate of Status A	Reflecting:		
	APOSTILLE'/	NOTARIAL CERTIFICATION		
COUNTRY OF DESTIN	YATION			
NUMBER OF CERTIFIC	CATES REQUESTED			
TOTAL OWED \$ 70		ACCOUNT # 120140000108 United Corporate Services, Inc. ACCOUNT # 120140000108 United Corporate Services, Inc. ACCOUNT # 120140000108 United Corporate Services, Inc.		
Please call Tina at	the above number for	any issues or concerns. Thank you so much!		

'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.

(If name unavaila	ble in Florida, enter alternate corporate name a	idopted for the purpose of transaction	ng business in Florida)	-
Delaware 2.	3.			
(State or country	under the law of which it is incorporated)	(FEI number, if a	pplicable)	-
4. September 1, 202	20 5.			
(Date of incorporation)		(Date of duration, if other than perpetual)		-
6				_
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.15	Florida, if prior to registration) 02, F.S., to determine penalty liabil	ity)	
7 1040 Biscayne Bly	ed, 3105, Miami, FL 33132			
<i>/</i>	(Principal offic	re <u>street</u> address)		•
			20	
	(Current mailin	g address, if different)		
8. Name and street Name:	address of Florida registered agent: (P.O United Corporate Services, Inc.	. Box <u>NOT</u> acceptable)	JAN -6 At	
Office Address:	3458 Lakeshore Drive		AH 10: 43	
	Tallahassee	. Florida <u>32312</u> (Zip code)	~	
	(City)	(Zip code)		
designated in this of further agree to co and I am familiar	nt's acceptance: ed as registered agent and to accept service application, I hereby accept the appointm mply with the provisions of all statutes re with and accept the obligations of my pos	ent as registered agent and agr lative to the proper and comple	ee to act in this capa	city. 1

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

under the law of which it is incorporated.

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

A. DIRECTORS	Jose Antonio da Costa Baltazar		William R. Pressley III	
□Chairman	Name: 1040 Biscayne Blvd, 3105	□Chairman □Vice Chairman ■Director	Name:William R. Pressley III Name:1040 Biscayne Blvd, 3105 Address:Miami, FL 33132	
□Vice Chairman	Address:			
Director	Miami, FL 33132			
President		□President		
□Vice President		□Vice President		
☐ Secretary	□Treasurer	Secretary	□Treasurer	
Other CFO	Chair of the Board	■Other	Other COO	
□Chairman	Name:	□Chairman	Name:	
□Vice Chairman	Address:	□Vice Chairman	Address;	
□Director		□Director		
□President		□President		
□Vice President		□Vice President	<u> </u>	
☐ Secretary	□Treasurer	☐ Secretary	□Treasurer	
□Other	□Other	□Other	Other	
□ Chairman	Name:	□Chairman	Name:	
			Address:	
	Address:	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 att added to the index when filing your Florida Department of the state	nent of State Annual Re		
	Signature of Director			
The officer or direct she is aware that far s.817.155, F.S.	ctor signing this document (and who is listed in numb lise information submitted in a document to the Depar	er 11 above) affirms the riment of State constitu	at the facts stated herein are true and that he or ites a third degree felony as provided for in	
13. William R. P	ressley III, Chief Executive Officer			

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "OLEA COLLECTION, 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 SIXTH DAY OF JANUARY, A.D. 2023.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "OLEA COLLECTION, INC." WAS INCORPORATED ON THE FIRST DAY OF SEPTEMBER, A.D. 2020.

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

Authentication: 202438121

Date: 01-06-23

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