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COVER LETTER

_	stration Section sion of Corporations			
SUBJECT:	SPWONE GROUP US HOL	DING INC.		
JODGE CT.	Name	of corporation	- must include suffix	
Dear Sir or N	Aadam:			
"Certificate of	I "Application by Foreign Co of Existence," or "Certificate nced foreign corporation to t	of Good Stand	ling" and check are submi	itted to register the
Please return	all correspondence concern	ing this matter	to the following:	7023 JAN
GREGORY E	E. YOUNG			JAN 7
		Name of I	Person	0
GREYFIELD	ADVISERS, LLC			P T
		Firm/Comp	pany	PH 3: 24
P.O. BOX 310	06			24
		Addre	SS	
PALM BEAC	TH, FL 33480			
		City/State an	d Zip code	
gyoung@grey	fieldadvisers.com			
	E-mail address	s: (to be used fo	or future annual report not	ification)
For further in	nformation concerning this n	iatter, please ca	ill:	
GREGORY E	. YOUNG	561 at (573-0735	
Nan	ne of Person	Area Code	Daytime Telepho	ne Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		Registration Sec Division of Corp P.O. Box 6327	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
	check for the following ame heck payable to: FLORIDA D ling Fee	EPARTMENT ig Fee & □		\$87.50 Filing Fee, Certificate of Status & Certified Copy

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. SPWONE GRO	JOP OS HOLDING INC.				
	corporation; must include "INCORPORATE Corp," "Inc," "Co," or "Corp,")	ED,'' "C	OMPANY," "CORPORA	TION,"	
				<u></u>	
(If name unavai	lable in Florida, enter alternate corporate na	ne adop	ited for the purpose of trans	acting business in Florida)	
2. Delaware		3. 92-	1724826		
	ry under the law of which it is incorporated)		(FEI number,	if applicable)	
4. January 6, 2023	3	5. Pen	petual		
· · · —	(Date of incorporation)		(Date of duration, if other than perpetual)		
6. N/A					
	(Date first transacted busines (SEE SECTIONS 607.1501 & 60	7.1502.	F.S., to determine penalty l		
7. c/o Michael R. A	dair, 3200 North University Drive, Suite 20	4, Coral	Springs, FL 33065	207	
	(Principal	office <u>st</u>	reet address)	in the same	
(SAME)					
	(Current ma	iling ad	dress, if different)	(i) CD (i)	
8. Name and stre	eet address of Florida registered agent: (P.O. Bo	ox <u>NOT</u> acceptable)	10 w = 1	
Name:	Gregory E. Young		_	24	
Office Address:	2584 Avenue Au Soleil		_		
	Gulf Stream		, Florida <u>33483</u>	_	
	(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 pudesignated in this application, I hereby accept the appointment as registered agent and agree to act in this capacy further agree to comply with the provisions of all statutes relative to the proper and complete performance of my and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this applicati the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdicunder the law of which it is incorporated.

■Chairman	Name:	□ Chairman	Adam Bulmer Name:
□Vice Chairman	P.O. Box 3106 Address:	□Vice Chairman	Address: P.O. Box 671
■ Director	Palm Beach, FL 33480 (USA)	□Director	Epson, Surrey KT1 79PE (GB)
□President		□President	
□Vice President		□Vice President	
☐ Secretary	□Treasurer	Secretary	□Treasurer
□Other	Other	General C	Counsel
□Chairman □Vice Chairman ■Director	Name: P.O. Box 671 Address: Epson, Surrey KT1 79PE (GB)	□Chairman □Vice Chairman □Director	Name: Michasel R. Adair Name: 3200 N. University Dr., Address: Coral Springs, FL 33065
□President		□President	
□Vice President		□Vice President	
□Secretary	□Treasurer	□Secretary	□Treasurer
□Other	Other	Other Asst. Trea	asurer
□Chairman □Vice Chairman	Name: P.O. Box 3106 Address:	□Chairman □Vice Chairman	Name: Address:
Director	Palm Beach, FL 33480 (USA)	□Director	
□President		□President	2
■ Vice President		□Vice President	
□Secretary	□Treasurer	☐ Secretary	□Treasurer
□Other	Other	□Other	□Other
	Use an attachment to report more than six (6). The added to the index when filing your Florida Dep	partment of State Annual Re	

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and the she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for s.817.155, F.S.

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

DELAWARE, DO HEREBY CERTIFY "SPWONE GROUP US HOLDING 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 THIRTEENTH DAY OF JANUARY, A.D.

2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SPWONE GROUP US HOLDING INC." WAS INCORPORATED ON THE SIXTH DAY OF JANUARY, A.D. 2023.

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

Authentication: 20249059

Date: 01-13-2

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