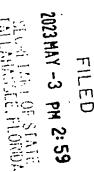
(Re	equestor's Name)	
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PICK-UP	WAIT	MAIL MAIL
(Bu	usiness Entity Na	me)
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Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
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A. Jones

COVER LETTER

	stration Section sion of Corporations				
SUBJECT:	TRENTIN USA, INC	· .			
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	·	Name of corporati	on - must	include suffix	
Dear Sir or N	/ladam:				
"Certificate of	l "Application by For of Existence," or "Cer nced foreign corporat	rtificate of Good St	anding" a	and check are sub	et Business in Florida." mitted to register the
Please return	all correspondence c	oncerning this mat	ter to the	following:	
ALESSANDE	RA PIRAS				
		Name (of Person		
CINOTTI LL	P				
		Firm/Co	ompany		
66 W Flagler	St. Ste 1002-1003				
		Ad	dress	***	
MIAMI, FL 3	3130				
		City/State	and Zip	code	
legalmiami@o	cinottigalgano.com				
	E-mail	address: (to be use	d for futu	re annual report r	otification)
For further in	nformation concerning	g this matter, pleas	e call:		
Mariagrazia		786 at (577	5772291	
Nan	ne of Person	Area C	ode	Daytime Telep	hone 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		
	_		□ \$78.7	ATE 5 Filing Fee & fied 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.

TRENTIN USA	A, INC.		
(Enter name of c "Inc" "Co.," "C	corporation: must include "INCORPORATEL forp." "Inc." "Co." or "Corp.")	D," "COMPANY," "CORPORATION	V."
(If name unavail	able in Florida, enter alternate corporate nam	e adopted for the purpose of transacting	ng business in Florida)
DELAWARE		· · · · · · · · · · · · · · · · · · ·	_
2. (State or country)	ry under the law of which it is incorporated)	(FEI number, if ap	oplicable)
6/6/2013			
4. (Date	e of incorporation)	. (Date of duration, if other	than perpetual)
6.			
	(SEE SECTIONS 607.1501 & 607.	in Florida, if prior to registration) 1502. F.S., to determine penalty liabili	ity)
7. 66 W Flagler Stre			
	(Principal of	fice street address)	
	(6,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ing address, if different)	
	(Current man	ing address, it different)	
8. Name and stree	et address of Florida registered agent: (P	O. Box NOT acceptable)	
Name:	CINOTTI LLP	<u></u> ,	2
Office Address:	66 W Flagler Street, Ste 1002-1003		FILED 1023 MAY -3 PM SECHTIARY OF S ALLAMASSEE, FI
	MIAMI, FL 33130	Florida $\frac{33130}{\text{(Zip code)}}$	夢子 子 円
	(City)	(Zip code)	
Having been nan designated in this further agree to c	ent's acceptance: ned as registered agent and to accept ser s application, I hereby accept the appoin- comply with the provisions of all statutes r with and accept the obligations of my p	tment as registered agent and agro- relative to the proper and comple	d corpognition at the place see to action this pacity. I
_	(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						
□Chairman	Name:	□Chairman	Name:			
□Vice Chairman	Address: 66 W Flagler Street, Ste 1002	□Vice Chairman	Address: 239 Avenida Arterial Hostos			
■Director	MIAMI, FL 33130	■Director	Ste 406			
₽ President		□President	SAN JUAN, PR 00926			
□Vice President		□Vice President				
☐ Secretary	□Treasurer	■ Secretary	Treasurer			
□Other		□Other	Other			
□Chairman □Vice Chairman	Name: Paolo Zanotti Name: 350 Fift Ave, 41st Floor	□Chairman	Name: Stefan Geubel Name: 66 W Flagler Street, Ste 1002 Address:			
Director	NEW YORK, NY 10118	☐ Director	MIAMI, FL 33130			
□President		□President				
□Vice President		■ Vice President				
☐ Secretary	□Treasurer	☐ Secretary	□Treasurer			
□Other		□Other				
☐Chairman ☐Vice Chairman ☐Director	Michele Caturato Name:66 W Flagler Street, Ste 1002 Address: MIAMI, FL 33130	□Chairman □Vice Chairman □Director	Name:Address:			
□President		□President				
□Vice President		□Vice President				
☐ Secretary	Treasurer	☐ Secretary	☐ Treasurer			
□Other	Other	□Other	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. Signature of Displace of Officer.						

The officer or director signing this document (and who is fisted 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.

FILIPPO CINOTTI, Secretary

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "TRENTIN USA, 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 TWENTY-SIXTH DAY OF APRIL, 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 "TRENTIN USA, INC." WAS INCORPORATED ON THE SIXTH DAY OF JUNE, A.D. 2013.

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

Authentication: 203223743

Date: 04-26-23

5346356 8300 SR# 20231652724