Fax: 8134365206



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To:

Division of Corporations Fax Number : (850)617-6383

From:

Account Name	:	REGISTERED AGENTS	INC
Account Number	:	120090000081	
Phone	:	(307)200-2803	
Fax Number	:	(813)436-5206	

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

FOREIGN PROFIT/NONPROFIT CORPORATION **Empower Renewable Energy Development, Inc.** 2024 HAR 15 Certificate of Status 0 Certified Copy 0 ö or of WEWE Page Count 04 Į. , PH 12: Estimated Charge \$70.00 2024 MAG 15 $\frac{1}{2}$. ----- --- -

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Help

MAR 1 6 2024 K. Brumbley

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.

Empower Renew	vable Energy Development, Inc.			
(Enter name of co "Inc.," "Co.," "Co	erporation; must include "INCORPORATED, orp," "Inc." "Co." or "Corp.")	" "COMPANY," "CORPORATION,"	-	
(If name unavails	able in Florida, enter alternate corporate name	adopted for the purpose of transacting business in Florida)	-	
A 14				
(State or countr	y under the law of which it is incorporated)	(FEI number, if applicable)	-	
(Date	of incorporation)	(Date of duration, if other than perpetual)	*	
6			_	
	(Date first transacted business is (SEE SECHONS 607.1501 & 607.15	n Florida, if prior to registration) 502, F.S., to determine penalty liability)		
7. 7901 4th SLN ST	(SEE SECTIONS 607.1301 & 607.13 E 300 St. Potorsburg FL 33702 (Principal off			
	(Principal off	ice <u>street</u> address)		
7901 4th 5t N ST	E 300 St. Petersburg FL 33702			
	(Current mailir	ng address, if different)		
0.11				
S. Name and stree	et address of Florida registered agent: (P.C	J. Box <u>NUT</u> acceptable)	20	
Name:	Northwest Registered Agent LLC)շկ	
Office Address:	7901 4th St N STE 300		1024 KAR 1 5	
	St. Petersburg	, Flor.da <u>33702</u> (Zip code)	<u></u>	
	(City)	(Zip code)	FH	
9 Registered ag	ent's acceptance:		=	• •
Having been nam designated in this further agree to c	ed as registered agent and to accept servi application. I hereby accept the appointn	ice of process for the above stated corporation at the p ment as registered agent and agree to act in this capac relative to the proper and complete performance of my sition as registered agent.	city	,
-	The Name			
<u></u>	(Registered agent's si	ignature)		
10. Attached is a the Department of	certificate of existence duly authenticated.	not more than 90 days prior to delivery of this applica- fficial having custody of corporate records in the jurisd	tion to liction	

(1) For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (b) total];

THE ALL AND AL

under the law of which it is incorporated.

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To: 18506176383

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Page: 3/4

)Chairman	Nelson Jr, Jesse Name:	□ Chaimnan	Johnson, Toddy Name:
Nice Chairman	7901 41h St N STE 300	🗇 Vice Chairman	7901 4th St N STE 300 Address:
Director	St. Petersburg FL 33702	Director	St. Petersburg FL 33702
President		President	
		TVice President	
Secretary		USecremery	E Treasurer
EOther		00ther	[] Other
		<u></u>	
IChairman	Johnson, Juliet Namo:	Chairman	Name:
Wice Chairman	7901 4th St N STE 300 Address:	⊡Vice Chairman	Address:
2 Director	St. Potorsburg FL 33702	Director	
: President		⊡President	
DVice President		-Vice Provident	
Secretary		OScereury	Treasue:
- JOiher		⊡Other	
] Chairman	Name:	Chairman	Name
DVice Chairman	٨ἀٺ:دى:	⊡Vice Chairman	Address:
Director		Director	
DPresident	······································	DPresident	
DVice President	······································	Vice President	
Secretary	C Treasurer	OSecretary	©7reasurer
20the:		Other	D0ther
ndividuals may be	Use an attachment to report more than six (6). The n radded to the index when filing your Florida Depart Signature of Directo ctor signing this document (and who is listed in num	ment of State Annual Re	cioit term.
he officer or direc	ctor signing this document (and who is listed in num ilse information submitted in a document to the Dep	for 11 above) affirms th arunent of State constitu	hat the facts stated herein are true and that a- nes a third degree felouv as provided for in
he is expression that fo			
he is sware that fa .817.155, F.S.	Typed or printed name and saparity of pe	14141- 0-1	•



Secretary of State Certificate of Status

I, SHIRLEY N. WEBER, PH.D., California Secretary of State, hereby certify:

Entity Name:	Empower Renewable Energy Development, Inc.
Entity No.:	4799649
Registration Date:	10/11/2021
Entity Type:	Stock Corporation - CA - General
Formed In:	CALIFORNIA
Status:	Active

The above referenced entity is active on the Secretary of State's records and is authorized to exercise all its powers, rights and privileges in California.

This certificate relates to the status of the entity on the Secretary of State's records as of the date of this certificate and does not reflect documents that are pending review or other events that may impact status.

No information is available from this office regarding the financial condition, status of licenses, if any, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of March 14, 2024.

CAG-K

SHIRLEY N. WEBER, PH.D. Secretary of State

Certificate No.: 191109224

To verify the issuance of this Certificate, use the Certificate No. above with the Secretary of State Certification Verification Search available at **biz**fileOnline.sos.ca.gov.



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To:

Division of Corporations Fax Number (858)617-6353

From:

Account Name : REGISTERED AGENTS INC. Account Number : 120090000001 Phone : (307)200-2003 Fax Number : (813)436-5206

> **Inter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email Address:_____

FOREIGN PROFIT/NONPROFIT CORPORATION Trans Cosmos America, Inc.

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Estimated Charge	\$70.00

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MAR 1 6 2024 K. Brumbley

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.

Trans Cosmos /						_
(Enter name of e "Inc.," "Co.," "C	orporation: must include "INCORPORATI orp," "Inc," "Co," or "Corp.")	ED." "CO	MPANY," "CORPORATION	•.		
			-			
Cattorne	able in Florida, enter alternate corporate na			-)
2. <u>Caniornia</u>	California 3. (State or country under the law of which it is incorporated)			- <u> </u>		_
	y under the law of which it is incorporated)	}	(FEI number, if app	plicable)		
4		5	(Date of duration, if other (
(Date	of incorporation)		(Date of duration, if other a	han perpeti	al)	
6.						
	(Date first transacted busines (SEE SECTIONS 607.1501 & 60			(y)		_
7. 7901 4th St N ST	E 300 St. Petersburg FL 33702					
	(Principal)	office stre	et address)			
7901 4th St N ST	E 300 St. Petersburg FL 33702				207	
	(Current ma	uling addro	ess, if different)	· -	2024 KAR	- :
8. Name and stree	at address of Florida registered agent: (P.O. Box	NOT acceptable)	•	ភា	문장
Name:	Northwest Registered Agent LLC				PH 12:	•
Office Address:	7901 4th St N STE 300					
					3	
	(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.

The Norm (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.

24-10:32:48 PDT	. To 13506176383	I	Page: 3/4	Fax: 8134365206
A. DIRECTORS				
Chairman	Eijiro Yamashila Name:	Chairman	Kiyonori Takechi Name:	
🗇 Vice Chairman	Address:	Urce Chairman	Address:	
≝Director	7901 4th St N STE 300		7901 4th St N STE 300	
□President	St. Petersburg FL 33702	President	St. Petersburg FL 33702	
⊡Vice President		Vice President		
□Secretary	□ Treasurer	□ Secretary	□Treasurer	
□Other	Other	Other	D0her	
DChaimian	Haruka Kikuchi Name:	Chairman	Shinichi Nagakura Name:	
Vice Chairman	Address:		Address:	
[]Director	7901 4th St N STE 300	P Director	7901 4th St N STE 300	
DPresident	St. Petersburg FL 33702		St. Petersburg FL 33702	
□Vice President				
⊡Secretary	C Treasurer		🗇 Freasurer	
⊡Other	Other	Other	Other	
DChairman	Name:	Chairman	Name:	
LIVice Chairman	Address:	Vice Chairman	Address:	
Director			·····	
DPresident		President		
□Vice President		Vice President		
OSecretary	🗆 Treasurer	Secretary	E l Treasure r	
DOther	Other	Other	①()ther	

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.

Signature of Director or Officer 12.

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 \$.817.155, F.S.

13 Kiyonori Takechi, President & COO



Secretary of State Certificate of Status

I, SHIRLEY N. WEBER, PH.D., California Secretary of State, hereby certify:

Entity Name:	TRANS COSMOS AMERICA, INC.
Entity No.:	1435947
Registration Date:	05/05/1988
Entity Type:	Stock Corporation - CA - General
Formed In:	CALIFORNIA
Status:	Active

The above referenced entity is active on the Secretary of State's records and is authorized to exercise all its powers, rights and privileges in California.

This certificate relates to the status of the entity on the Secretary of State's records as of the date of this certificate and does not reflect documents that are pending review or other events that may impact status.

No information is available from this office regarding the financial condition, status of licenses, if any, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of March 14, 2024.

Agen

SHIRLEY N. WEBER, PH.D. Secretary of State

Certificate No.: 191225927

To verify the issuance of this Certificate, use the Certificate No. above with the Secretary of State Certification Verification Search available at **biz**fileOnline.sos.ca.gov.