

| (Requestor's Name)                      |  |  |  |  |  |  |  |  |
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| (City/State/Zip/Phone #)                |  |  |  |  |  |  |  |  |
| PICK-UP WAIT MAIL                       |  |  |  |  |  |  |  |  |
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| (Business Entity Name)                  |  |  |  |  |  |  |  |  |
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| (Document Number)                       |  |  |  |  |  |  |  |  |
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| Special Instructions to Filing Officer: |  |  |  |  |  |  |  |  |
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## **COVER LETTER**

|   |                                 | tration Section for of Corporations  |                     |   |   |  |  |  |
|---|---------------------------------|--|---------------------|---|---|--|--|--|
| SUBJE                                     | <i>C</i> T-                     | TEUIN HOLDINGS USA INC.  |                     |   |   |  |  |  |
| Name of corporation - must include suffix |                                 |  |                     |   |   |  |  |  |
| Dear Sir                                  | or M                            | adam:  |                     |   |   |  |  |  |
| "Certific                                 | cate of                         | "Application by Foreign Corp<br>"Existence," or "Certificate of<br>red foreign corporation to tran   | f Good Stand        | ling" and check are subn  |   |  |  |  |
| Please re                                 | eturn a                         | all correspondence concerning  | g this matter       | to the following:   |   |  |  |  |
| Bill Wei                                  | ss Esq                          |  |                     |   |   |  |  |  |
|   |                                 |  | Name of I           | Person  |   |  |  |  |
|   |                                 |  | Firm/Com            | pany  |   |  |  |  |
| 20 Club                                   | Court                           |  |                     | •   |   |  |  |  |
|   |                                 |  | Addre               | 88  |   |  |  |  |
| Pleasant                                  | ville, N                        | NY, 10570  |                     |   |   |  |  |  |
|   | _                               |  | City/State ar       | id Zip code   |   |  |  |  |
| billweiss                                 | s@opte                          | mline.net  |                     |   |   |  |  |  |
|   |                                 | E-mail address:  | (to be used f       | or future annual report no  | otification)  |  |  |  |
| For furth                                 | her int                         | formation concerning this ma   | tter, please ca     | all:  |   |  |  |  |
| Bill Weiss 914 at (                       |                                 |  | 914                 | 238-0963  |   |  |  |  |
|   | Nam                             | e of Person  | Area Code           | Daytime Teleph  | none Number   |  |  |  |
|   | Regis<br>Divis<br>The C<br>2415 | EET/COURIER ADDRESS:<br>tration Section<br>ion of Corporations<br>lentre of Tallahassee<br>N. Monroe Street, Suite 810<br>nassee, FL 32303 |                     | MAILING AI<br>Registration Se<br>Division of Co<br>P.O. Box 6327<br>Tallahassee, Fl | ection<br>proprations   |  |  |  |
|   | iake ch                         | check for the following amou<br>eck payable to: FLORIDA DEI<br>ing Fee   | PARTMENT<br>Fee & □ | OF STATE<br>J \$78.75 Filing Fee &<br>Certified Copy                                | S87.50 Fifing Fee,<br>Certificate of Status &<br>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.

| TEUIN HOLDI                               | NGS USA INC.  |   |  |                   |           |  |
|---|---|---|--|-------------------|-----------|--|
| (Finter name of e<br>"Inc.," "Co.," "C    | orporation: must include "INCORPOI<br>orp," "Inc." "Co," or "Corp,")  | RATED," "C                                  | OMPANY," "CORPORATION,"  |                   |           |  |
| (If name mavail                           | able in Florida, enter alternate corpora  | He name ador                                | ted for the purpose of transacting busi                                  | ness in Florida)  |           |  |
| DELAWARE                                  |   | 7   |  |                   |           |  |
| (State or countr                          | y under the law of which it is incorpor   | rated)                                      | (FEI number, if applicab   | le)               |           |  |
| July 6, 1993                              |   |   |  |                   |           |  |
| (Date                                     | of incorporation)   | ''  | (Date of duration, if other than po                                      | erpetual)         |           |  |
| 6. March 2024                             |   |   |  |                   |           |  |
| v   |   |   | rida, if prior to registration)<br>F.S., to determine penalty liability) |                   |           |  |
| 7. One Harbor Drive                       | e, Suite 200, Sausalito, CA 94965   |   |  |                   |           |  |
| same                                      | (Prin   | eipal office <u>st</u>                      | reet address)  | 24 MAY -3         | On        |  |
| 8. Name and <u>stree</u><br>Name:         | (Current mailing address, if different)  Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)  Name:  Corporation Service Company |   |  |                   |           |  |
| Office Address:                           | 1201 Hays St.   |   | -  | #: 3 <b>8</b>     | ATE<br>DE |  |
|   | Tallahassee   |   | . Florida 32301<br>(Zîp code)  |                   | ñ         |  |
|   | (Ci(y)  |   | (Zip code)   |                   |           |  |
| designated in this<br>further agree to co | ed as registered agent and to acce<br>application. I hereby accept the a<br>omply with the provisions of all sto<br>with and accept the obligations of                    | ppointment<br>atutes relati<br>f my positio |  | et in this capaci | ity. 1    |  |
|   | Corporation Servi   | ice Compa                                   | ny   |                   |           |  |
|   | By: Laurel Bu   | ietsch                                      |  |                   |           |  |
|   | (Registered a   |   |  |                   |           |  |
| 10. Attached is a c                       | rertificate of existence duly authen  | iticated, not                               | nore than 90 days prior to delivery                                      | of this applicati | ion to    |  |

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.

the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction

## A. DIRECTORS Jane L. Thomas Name: Chairman Name: II Chairman One Harbor Drive Address: Address: ] ∐Vice Chairman □ Vice Chairman Suite 200 Director □Director Sausalito, CA, 94965 ■ President □President □Vice President □ Vice President □ Freasurer ☐ Freasorer **D**Secretary Secretary Other\_\_\_\_\_ \_Other \_\_\_\_\_ □Other\_\_\_\_\_ Murasaki Schneider Name: 1. Chairman □Chairman One Harbor Drive T Vice Chairman Address: □ Vice Chairman Address: Suite 200 ■Director □Director Sausalito, CA 94965 □President □ President □ Vice President □ Freasurer ■ Freusurer □ Secretary Secretary □Other \_\_\_\_\_ \_\_\_\_\_\_ [[Other \_\_\_\_\_ Tsutomu Igawa Name: □ Chairman **Chairman** One Harbor Drive □ Vice Chairman Address: □ Vice Chairman Address: Suite 200 □Director Director Sausalito, CA 94965 President President □ Vice President ☐ Vice President ☐Treasurer □ Secretary ☐ freasurer □ Secretary □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. 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, E.S.

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

DELAWARE, DO HEREBY CERTIFY "TEIJIN HOLDINGS 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.

2024.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TEIJIN HOLDINGS"
USA INC." WAS INCORPORATED ON THE SIXTH DAY OF JULY, A.D. 1993.

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

Authentication: 203342063

Date: 04-26-24

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