-24000003030

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
| |
| |
| W24-81347 |

Office Use Only



400429161024

RECEIVED

JUN 0 5 2024 K. Brumbley



June 4, 2024

COGENCY GLOBAL

SUBJECT: GRUNDENS USA, LTD. Ref. Number: W24000081347

Keep ongord File date

We have received your document for GRUNDENS USA, LTD. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name in line 1 must be listed exactly how it is registered in the home state and the acceptable suffix is just to be added to the end of the name in line 1.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

KYLE D BRUMBLEY
Regulatory Specialist II Supervisor Letter Number: 424A00012077

SEGRETANASSEE, FLORI



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: 120000000088 If there are any issues please contact Patrice at 850-202-9071

| Date: | 05/28/2024 | |
|---------------|---------------------------------|------------------------|
| Name: | Patrice Rush | |
| Reference #: | 2342886 | <u> </u> |
| Entity Name: | GRUND | ENS USA, LTD |
| | s of Incorporation/Authorizatio | n to Transact Business |
| Amend | dment | |
| Chang | e of Agent | |
| Reinst | atement | |
| ☐ Conve | rsion | |
| Merge | r | |
| ☐ Dissolu | ution/Withdrawal | |
| Fictitio | us Name | |
| Other_ | | |
| | | |
| Authorized Ar | mount:\$70.00 | |
| Signature: | Pall | |

COVER LETTER

| | COVEREE | IER |
|---|---|--|
| TO: Registration Sect Division of Corp | | |
| SUBJECT: | GRUNDEN | IS USA, LTD. |
| | Name of corporation - m | ust include suffix |
| Dear Sir or Madam: | | |
| "Certificate of Existence, | on by Foreign Corporation for Auth " or "Certificate of Good Standing corporation to transact business in | norization to Transact Business in Florida." "and check are submitted to register the Florida." |
| Please return all correspo | ndence concerning this matter to the | he following: |
| | Samantha Graç | gg |
| | Name of Person | on |
| | GRUNDENS USA, | LTD. |
| | Firm/Company | y |
| | 19332 Powder Hill | PINE |
| | Address | |
| | POULSBO, WA 9 | 8370 |
| | City/State and Z | ip code |
| | samantha.gragg@grun | dens.com |
| | E-mail address: (to be used for fu | iture annual report notification) |
| For further information co | oncerning this matter, please call: | |
| Kathryn Christ | ener at (518) | 213-0849 |
| Name of Person | Area Code | Daytime Telephone Number |
| STREET/COUR Registration Section Division of Corporate Centre of Tall 2415 N. Monroe Stallahassee, FL. 2 | orations llahassee Street, Suite 810 | MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 |
| Enclosed is a check for th Please make check payable t | e following amount: o: FLORIDA DEPARTMENT OF ! | STATE |

 $\hfill\Box$ \$78.75 Filing Fee & $\hfill\Box$ \$78.75 Filing Fee & $\hfill\Box$ \$87.50 Filing Fee,

■ \$70.00 Filing Fee

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.

| | GRUNDENS USA, LTD. Corporation | | | | |
|--|--|---|---------------------|--|--|
| | poration: must include "INCORPORATED," "(o," "Inc," "Co," or "Corp.") | COMPANY," "CORPORATION," | | | |
| (If name unavailable | le in Florida, enter alternate corporate name ado | pted for the purpose of transacting busi | ness in Florida | | |
| Washington | | 91-1502463 | | | |
| (State or country under the law of which it is incorporated) | | (FEI number, if applicable) | | | |
| 02/06/1991 (Date of incorporation) | | Perpetual | | | |
| | | (Date of duration, if other than perpetua | | | |
| | | | | | |
| | (SEE SECTIONS 007.1501 & 007.1502, | F.S., to determine penalty liability) | | | |
| | 19332 Powder Hill PI NE, POI (Principal office s | JLSBO, WA 98370 treet address) | | | |
| | 19332 Powder Hill PI NE, POI (Principal office of 19332 Powder Hill PI NE, POI (Current mailing a | JLSBO, WA 98370 treet address) JLSBO, WA 98370 ddress, if different) | 202111111 | | |
| Name and street: | 19332 Powder Hill PI NE, POI (Principal office s 19332 Powder Hill PI NE, POI | JLSBO, WA 98370 treet address) JLSBO, WA 98370 ddress, if different) | 202411736 | | |
| Name and street a | 19332 Powder Hill PI NE, POI (Principal office of 19332 Powder Hill PI NE, POI (Current mailing a | JLSBO, WA 98370 treet address) JLSBO, WA 98370 ddress, if different) | 2024111130 11 | | |
| Name: | 19332 Powder Hill Pl NE, POI (Principal office s 19332 Powder Hill Pl NE, POI (Current mailing a | JLSBO, WA 98370 treet address) JLSBO, WA 98370 ddress, if different) | 30 11 3: | | |
| | 19332 Powder Hill PI NE, POI (Principal office of 19332 Powder Hill PI NE, POI (Current mailing a laddress of Florida registered agent: (P.O. Electronic of P.O. El | JLSBO, WA 98370 treet address) JLSBO, WA 98370 ddress, if different) | 202411130 6.1 3: 02 | | |

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.

| Kathugh Christenec | Kathryn Christener, Assistant Secretary | |
|--------------------|---|--|
| | (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: Bryan Nohr | Chairman | Name: Nicolas Cederstrom Warchalowski | |
| □ Vice Chairman | Address:19332 Powder H | II PI NE □ Vice Chairman | Address: 19332 Powder Hill Pl NE | |
| ■Director | Poulsbo, WA 9837 | Director | Poulsbo, WA 98370 | |
| □President | | President | | |
| □Vice President | | □Vice President | | |
| ■ Secretary | ■ Treasurer | ☐ Secretary | □Treasurer | |
| ■Other | Other | Other | Other | |
| □Chairman □Vice Chairman □Director □President □Vice President □Secretary □Other | Grundens Americas C Name: | ☐ Chairman ☐ Vice Chairman ☐ Director ☐ President ☐ Vice President ☐ Secretary | Name: | |
| □Chairman | Name: | □Chairman | Name: | |
| □Vice Chairman | Address: | □ Vice Chairman | Address: | |
| □Director | | ☐ Director | | |
| □President | | □President | | |
| □Vice President | | Vice President | | |
| ☐ Secretary | □Treasurer | □Secretary | □Treasurer | |
| □Other | Dther | □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 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, F.S.





Secretary of State

I, STEVE R. HOBBS, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

CERTIFICATE OF EXISTENCE

OF

GRUNDENS USA, LTD.

I CERTIFY that the records on file in this office show that the above named entity was formed under the laws of the State of Washington and that its public organic record was filed in Washington and became effective on 02/06/1991.

I FURTHER CERTIFY that the entity's duration is Perpetual, and that as of the date of this certificate, the records of the Secretary of State do not reflect that this entity has been dissolved.

I FURTHER CERTIFY that all fees, interest, and penalties owed and collected through the Secretary of State have been paid.

I FURTHER CERTIFY that the most recent annual report has been delivered to the Secretary of State for filing and that proceedings for administrative dissolution are not pending.

Issued Date: 05/30/2024 UBI Number: 601 298 927

R Hobbie



ZEKSEZ-

Given under my hand and the Seal of the State of Washington at Olympia, the State Capital

Steve R. Hobbs, Secretary of State

Date Issued: 05/30/2024