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PICK-UP	☐ WAIT	MAIL		
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Certified Copies	_ Certificates	of Status		
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Special Instructions to	Filing Officer:	Ì		
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05/20/24--01027--007 \*\*87.50



		COVER LET	TTER
TO:	Registration Section		
	Division of Corporations		
SUBJ	JECT:	MOROSO USA	, INC.
002.	- · · · · - · · · · · · · · · · · · · ·	of corporation - r	nust include suffix
Dear S	Sir or Madam:		
"Certi		e of Good Standir	thorization to Transact Business in Florida," ng" and check are submitted to register the in Florida.
Please	return all correspondence concert	ning this matter to	the following:
Frank	Ferrante, Jr.		
		Name of Per	rson
Ferran	te, PLLC		
-		Firm/Compa	ny
5 Wes	t 10th Street, 10th Floor		
		Address	
New Y	York, NY 10011		
		City/State and	Zip code
согрог	ations@ferrantelawfirm.com	•	•
	E-mail addres	ss: (to be used for	future annual report notification)
For fu	rther information concerning this i	matter, please call	:
Frank Ferrante, Jr. 212 3084440		3084440	
	Name of Person	Area Code	Daytime Telephone Number
	STREET/COURIER ADDRESS Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 81 Tallahassee, FL 32303		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
	sed is a check for the following ammake check payable to: FLORIDA I		F STATE

□ \$78.75 Filing Fee & □ \$78.75 Filing Fee &

Certificate of Status Certified Conv

**■** \$87.50 Filing Fee,

Certificate of Status &

□ \$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.

"Inc.," "Co.," "Co	orporation; must include "INCORPORATED," orp." "Inc." "Co," or "Corp.")			
NEW YORK	ible in Florida, enter alternate corporate name	adopted for the purpose of transacting business in 20-2470965	in Fiorida)	
2. (State or country under the law of which it is incorporated)		(FEI number, if applicable)		
4 10/12/2004				
(Date	of incorporation)	(Date of duration, if other than perpet	ual)	
05/31/2024 5.				
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.15	n Florida, if prior to registration) 502, F.S., to determine penalty liability)	c c	
7 105 Madison Ave	enue, New York, NY 10016			
		ce <u>street</u> address)		
105 Madison Av	enue, New York, NY 10016			
	(Current mailin	g address, if different)		
8. Name and <u>strec</u> Name:	et address of Florida registered agent: (P.C Registered Agent Solutions, Inc.	D. Box NOT acceptable)	AHII: 12	
Office Address:	2894 Remington Green Ln., Stc. A	·· 	6	
	Tallahassee	. Florida <sup>32308</sup>		
	(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.

Assistant Secretary on Behalf of Registered Agent (Registered agent's signature) Schutums, Inc.

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: Giorgio Ricci	□Chairman	Name:				
□Vice Chairman	Address:	□Vice Chairman	Address: 105 Madison Avenue,				
□Director	New York, NY 10016	□Director	New York, NY 10016				
□President		President					
■ Vice President		□Vice President					
☐ Secretary	□Treasurer	Secretary	☐ Treasurer				
□Other	Other	□Other	Other				
□Chairman	Name:	□Chairman	Name:				
□Vice Chairman	Address:	□Vice Chairman	Address:				
□Director		□Director					
□President		□President					
□Vice President		□Vice President					
□ Secretary	□Treasurer	Secretary	□Treasurer				
□Other	□Other	□Other	Other				
□Chairman	Name:	□Chairman	Name:				
□Vice Chairman	Address:	□ Vice Chairman	Address:				
□Director		□Director					
□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 Director of	r 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 o 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.							

13. Giorgio Ricci, Vice President

(Typed or printed name and capacity of person signing application)

#### STATE OF NEW YORK

### DEPARTMENT OF STATE

#### Certificate of Status

I, BRENDAN C. HUGHES, Acting Secretary of State of the State of New York and custodian of the records required by law to be filed in my office, do hereby certify that upon a diligent examination of the records of the Department of State, as of the date and time of this certificate, the following entity information is reflected:

**Entity Name:** 

MOROSO USA, INC.

**DOS ID Number:** 

3112656

Entity Type:

DOMESTIC BUSINESS CORPORATION

**Entity Status:** 

**EXISTING** 

Date of Initial Filing with DOS:

10/12/2004

**Statement Status:** 

CURRENT

**Statement Due Date:** 

10/31/2026

I certify that the following is a list of documents on file in the Department of State for said entity:

**Document Type:** 

CERTIFICATE OF INCORPORATION

Date of Filing:

10/12/2004

**Entity Name:** 

MOROSO USA, INC.

**Document Type:** 

BIENNIAL STATEMENT

Date of Filing:

11/08/2006

**Effective Date:** 

10/01/2006

**Document Type:** 

BIENNIAL STATEMENT

Date of Filing:

05/03/2012

Effective Date:

10/01/2010

Page Lof 3

**Document Type:** 

CERTIFICATE OF CHANGE

Date of Filing:

08/29/2012

**Document Type:** 

AMENDMENT TO BIENNIAL STATEMENT

Date of Filing:

08/29/2012

Effective Date:

10/01/2010

Document Type:

BIENNIAL STATEMENT

Date of Filing:

04/23/2013

Effective Date:

10/01/2012

**Document Type:** 

BIENNIAL STATEMENT

Date of Filing:

10/15/2014

**Effective Date:** 

10/01/2014

Document Type:

BIENNIAL STATEMENT

Date of Filing:

10/21/2016

Effective Date:

10/01/2016

Document Type:

CERTIFICATE OF CHANGE

Date of Filing:

02/14/2019

Document Type:

**BIENNIAL STATEMENT** 

Date of Filing:

10/23/2020

Effective Date:

10/01/2020

Document Type:

**BIENNIAL STATEMENT** 

Date of Filing:

05/14/2024

Above space is left blank intentionally.

No information is available from this office regarding the financial condition, business activity or practices of this entity.



WITNESS my hand and official seal of the Department of State, at the City of Albany, on May 14, 2024 at 03:53 P.M.

Brandon C. Heyles

BRENDAN C. HUGHES Acting Secretary of State

Authentication Number: 100005734100 To Verify the authenticity of this document you may access the Division of Corporation's Document Authentication Website at <a href="http://ecorp.dos.ny.gov">http://ecorp.dos.ny.gov</a>