F24000003484

| (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: |
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Office Use Only



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CT CORP

(850) 656- 4724 3458 lakesore Drive Tallahassee, FL 32312

06/27/2024

| Da | ite: | 06/27/2024 | - w: 1 >W |
|--|------------------------------|--|--|
| | | Acc#I20160000072 | 4: () = W |
| Name: | Global Sha | ares, Inc. | |
| Document #: | | | |
| Order #: | 15712905 | | |
| Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing: Certified Copy of | | | |
| Apostille/Notarial Certification: | | Country of Destination: Number of Certs: | |
| Filing: 🗸 | Certified Plain: COGS: | d: 🗸 | Email Address for Annual Report Notifications: |
| Availability Document Examiner Updater Verifier W.P. Verifier Ref# | Amount | :\$ 78.75 | |

Thank you!

COVER LETTER

| TO: Registration Section Division of Corporations | |
|---|--|
| SUBJECT: Global Shares, Inc. | |
| | on - must include suffix |
| Dear Sir or Madam: | |
| The enclosed "Application by Foreign Corporation for "Certificate of Existence," or "Certificate of Good Standard above referenced foreign corporation to transact busing | anding" and check are submitted to register the |
| Please return all correspondence concerning this matter | er to the following: |
| Marcela Castro | |
| Name o | f Person |
| JPMorgan Chase Bank, National Association | |
| Firm/Co | mpany |
| 277 Park Avenue, Floor 12 | |
| Add | ress |
| New York, NY, 10172-0003 | |
| City/State | and Zip code |
| ots.annualreports@jpmchase.com | |
| E-mail address: (to be used | for future annual report notification) |
| For further information concerning this matter, please | call: |
| Marcela Castro 718 | 242-5814 |
| Name of Person Area Co | de Daytime Telephone 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 |
| Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEPARTMENT \$\Boxed{\text{S70.00 Filing Fee}}\$ \$\Boxed{\text{Certificate of Status}}\$ | T OF STATE □ \$78.75 Filing Fee & □ \$87.50 Filing Fee, Certified Copy 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.

| Global Shares, I | Inc. | | | | |
|-----------------------------------|---|--|---|-------------|--|
| | orporation: must include "INCORPORATI orp," "Inc." "Co," or "Corp.") | ED, | "COMPANY," "CORPORATION," | | |
| (If name unavail: | able in Florida, enter alternate corporate na | me a | adopted for the purpose of transacting business i | n Florida) | |
| Delaware | | 3 | 83-0458588 | | |
| | y under the law of which it is incorporated |) | (FEI number, if applicable) | | |
| 03/31/2006 | | 5 | | | |
| (Date | of incorporation) | (Date of duration, if other than perpett | (Date of duration, if other than perpetual) | | |
| 09/25/2023 | | | | | |
| , and a second | Boulevard, Floor 9, Jersey City, NJ, 07310- (Principal | | ce <u>street</u> address) | | |
| | (Current ma | ailin | g address, if different) | | |
| 3. Name and <u>stree</u> Name: | et address of Florida registered agent: (C T Corporation System | P.O | . Box <u>NOT</u> acceptable) | 2024 JUN 27 | |
| Office Address: | 1200 South Pine Island Road | | | | |
| | Plantation | | FL 33324 | P:: 8: | |
| | (City) | | (Zip code) | 0 | |

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.

By: Stephen Rullis, VP & Asst. Secy.

(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.

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

| · • • • • | | | |
|--------------------|--|----------------------------|---|
| A. DIRECTORS | | | |
| □Chairman | Name: Daniel L. Steinkamp | Name: | |
| □Vice Chairman | Address: 575 Washington Boulevard, | □ Vice Chairman | Address: 575 Washington Boulevard, |
| ■Director | Floor 9, | ■Director | Floor 9. |
| □President | Jersey City, NJ, 07310 | President | Jersey City, NJ, 07310 |
| □ Vice President | | □Vice President | |
| □Secretary | □Treasurer | ☐ Secretary | □Treasurer |
| □Other | □ Other | □Other | |
| □Chairman | Name: Tim Houstoun | □Chairman | Name: Adetunji Ogunmefun |
| □ Vice Chairman | Address: 575 Washington Boulevard. | □Vice Chairman | Address: 575 Washington Boulevard. |
| Director | Floor 9. | □Director | Floor 9, |
| □President | Jersey City, NJ, 07310 | □President | Jersey City, NJ, 07310 |
| □Vice President | - | ■ Vice President | |
| □Secretary | □Treasurer | ■ Secretary | □Treasurer |
| □Other | □Other | □Other | Other |
| □ Chairman | Name:Tom Wallace | □Chairman | Name: Andrea Belen Daneri |
| □Vice Chairman | Address: 575 Washington Boulevard, | □Vice Chairman | Address: 575 Washington Boulevard. |
| □Director | Floor 9, | Director | Floor 9. |
| □President | Jersey City, NJ, 07310 | □President | Jersey City, NJ, 07310 |
| □ Vice President | | | |
| ☐ Secretary | | □ Secretary | □Treasurer |
| Other | Other | □Other | Other |
| individuals may be | Jse an attachment to report more than six (6). The added to the index when filing your Florida Depa Advante C. Signature of Direct | rtment of State Annual Rep | for reporting purposes only. Non-indexed port form. |

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.

Page 1



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

DELAWARE, DO HEREBY CERTIFY "GLOBAL SHARES, 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 SEVENTH DAY OF MAY, 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 FRANCHISE TAXES HAVE BEEN PAID TO DATE.



Jeffrey W. Buflock, Secretary of State

Authentication: 203412700