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Division of Corporations

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LIESER SKAFF ALEXANDER, PLLC

Account Number : I20150000057 : (813)280-1256 Phone

Fax Number

: (813)251-8715

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

Email Address: joseph@jst.law

FOREIGN PROFIT/NONPROFIT CORPORATION Talentou Inc.

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COVER LETTER

TO:		ration Section on of Corporations						
SUBJ	ECT:	Talentou Inc.						
Name of corporation - must include suffix								
Dear S	ir or M	adam:						
"Certif	icate of		of Good Stand	Authorization to Transact Business in Florida," ling" and check are submitted to register the s in Florida.				
Please	return s	ill correspondence concernir	ng this matter	to the following:				
Ghada	Skaff, E	sq.						
		·	Name of F	Person				
Lieser !	Skaff, P	LLC						
			Firm/Com	pany				
403 N.	Howard	Avenue						
	·		Addre	SS				
Tampa,	FL 336	06						
			City/State ar	d Zip code				
joseph(@jst.law	; with cc to neenu.benjamin@i	gnitho.com					
		E-mail address:	(to be used fe	or future annual report notification)				
For fur	ther inf	ormation concerning this ma	itter, please ca	il:				
Ghada Skaff, Esq. 81		813	280-1256					
	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 810 Tallahassee, FL 32303			l:	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314				
Please r	nake ch	check for the following amore cock payable to: FLORIDA DE ng Fee	PARTMENT Fee &	OF STATE \$78.75 Filing Fee & S87.50 Filing Fee, Certified Copy Certificate of Status & Certified Copy				

To.

((H240003r287s 3)))

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.

	boto in i torica, cinci ancinate corporate name ac	lopted for the purpose of transacting business in Florida
Delaware	3.	
(State or country	y under the law of which it is incorporated)	(FEI number, if applicable)
10/11/2023 5		
		(Date of duration, if other than perpetual)
	(Date first transacted business in I	
211 Tech Blvd	(SEE SECTIONS 607.1501 & 607.150 #23, Tampa, Florida 33619	2, r.s., to determine penalty hability)
211 1001 0110,		street address)
	(rincipal office	: Mittel and Cas)
	(Current mailing	address, if different)
	•	
Name and stre	et address of Florida registered agent: (P.O.	Box NOT acceptable)
Name: Lieser Skaff, PLLC		
Name.	403 N Howard Ave.	<u> </u>
		
Tice Address:		33606
fice Address:	Tampa (City)	, Florida

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.

(Registered agent's signature)

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

A. DIRECTORS								
OChainnan	Joseph Olassa Name:	l'IChairman	Name:					
□Vice Chairman	Address:	OVice Chairman	Address:					
≅ Director	Tampa, Florida 33619	Director						
■ President								
		□Vice President						
Discontany	☐Treasurer	Secretary	U.! lessmet					
Other	Other	Other	□Other					
Chairman	Name:	□ Chairman	Namc:					
□Vice Chairman	Address:	□Vice Chairman	Address:					
□Director		□ Director						
□ President		□President						
Ovice President		□Vice President						
OScoretary	☐ Treasurer	Scorciary	☐Treasurer					
Other		Other	Other					
□Chairman	Name:	□ Cheirmen	Name:					
	Address:	☐Vice Chairman	Address:					
Director		Director	77001033					
□President		□President						
□Vice President		□Vice President						
Scorelary	☐'freasur er	☐ Secretary	□Treasurer					
□Oiher		DOIher	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 filling your Florida Department of State Annual Report form.								
12	Signatúre of Miccoor or							
Signature of Director or Officer The officer or director signing this document (and who is lister in nilitaber it I above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document by the Dephitment of State constitutes a third degree fellows as provided for in s.817.155, F.S.								
13. Joseph Olassa								
(Typed or printed name and capacity of person signing application)								

To:



Page 1

Page: 6 of 6

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAMARE, DO HEREBY CERTIFY "TALENTOU 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 TENTH DAY OF SEPTEMBER, 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 "TALENTOU INC." WAS INCORPORATED ON THE ELEVENTH DAY OF OCTOBER, A.D. 2023.

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

2476119 8300 SR# 20243644528 Authentication: 204353001

Date: 09-10-24

You may verify this certificate online at corp.delaware.gov/authver.shtml