

M22000204F366

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entry Name)

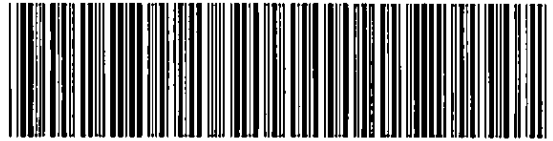
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MAR 23 PM 12:35
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2022 MAR 23 PM 3:58

S. HAWKES

MAR - 2021

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 568010 4326501

AUTHORIZATION



COST LIMIT : \$ 160.00

ORDER DATE : March 23, 2022

ORDER TIME : 2:11 PM

ORDER NO. : 568010-005

CUSTOMER NO: 4326501

FOREIGN FILINGS

NAME: DELTEC INTERNATIONAL (US), LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
 PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland -- EXT#

EXAMINER: _____



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 24, 2022

CSC

SUBJECT: DELTEC INTERNATIONAL (US), LLC
Ref. Number: W22000038368

We have received your document for DELTEC INTERNATIONAL (US), LLC .
However, the enclosed document has not been filed and is being returned to you
for the following reason(s):

Please list the complete principal office address.

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

Suzanne Hawkes
Regulatory II

Letter Number: 922A00006916

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Deltec International (US), LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Margaret Rosenfeld

Name of Person

Deltec International (US), LLC

Firm/Company

P.O. Box N-3229, Deltec House, Lyford Cay

Address

Nassau, Bahamas

City/State and Zip Code

mrosenfeld@deltecintl.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

N/A

Name of Contact Person

N/A

at (_____) _____

Area Code

N/A

Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$125.00 Filing Fee

☒ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy

☒ \$160.00 Filing Fee, Certificate
of Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS
IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Deltec International (US), LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. Delaware
(Jurisdiction under the law of which foreign limited liability company is organized)

3. N/A
(FEI number, if applicable)

4. N/A
(Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. P.O. Box N-3229, Deltec House, Lyford Cay
(Street Address of Principal Office)

6. P.O. Box N-3229, Deltec House, Lyford Cay
(Mailing Address)

Nassau, Bahamas

Nassau, Bahamas

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida 32301
(City) (Zip code)

FILED
23 PM 12:35
STATE

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated limited liability company 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.

Corporation Service Company

By: Alexis Weir assistant vice president
(Registered agent's signature)

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity: Name and Address:

☐ Manager Name: Margaret Rosenfeld

☐ Member Address: P.O. Box N-3229

☒ Authorized Deltec House, Lyford Cay

Nassau, Bahamas

☐ Other _____ ☐ Other _____

☐ Manager Name: FinCap Holdings Ltd.

☒ Member Address: P.O. Box N-3229

☐ Authorized Deltec House, Lyford Cay

Nassau, Bahamas

☐ Other _____ ☐ Other _____

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

☐ Other _____ ☐ Other _____

Title or Capacity: Name and Address:

☐ Manager Name: Odetta Morton

☐ Member Address: P.O. Box N-3229

☒ Authorized Deltec House, Lyford Cay

Nassau, Bahamas

☐ Other _____ ☐ Other _____

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

☐ Other _____ ☐ Other _____

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

☐ 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.

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any 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.

DocuSigned by:
Margaret Rosenfeld
02B3F6536330458 ..

Signature of an authorized person

Margaret Rosenfeld

Typed or printed name of signee

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "DELTEC INTERNATIONAL (US), LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-THIRD DAY OF MARCH, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "DELTEC INTERNATIONAL (US), LLC" WAS FORMED ON THE SEVENTH DAY OF DECEMBER, A.D. 2012.

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



5250097 8300

SR# 20221126712

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

A handwritten signature in black ink, appearing to read "JB", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Authentication: 202986803

Date: 03-23-22