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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (954) 817-4383

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (954) 208-0845
Fax Number : (614) 573-3496

2023 JAN 27 PM 12:24

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

Email Address: carol.marcus@dsl.com

Foreign Limited Liability Company Hillebrand Gori USA LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

S. ROBERTS

JAN 30 2023

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

IN COMPLIANCE WITH SECTION 605.0602, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Hillebrand Gori USA 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. Delware 3. 51-0389841
(Jurisdiction under the law of which foreign limited liability company is organized) (LLC number, if applicable)

4. 01/20/2023
(Date first transacted business in Florida, if prior to registration)
(See sections 605.0901 & 605.0903, F.S. to determine penalty liability)

5. 2147 Route 27, Suite 401 6. c/o DHL
(Street Address of Principal Office) (Mailing Address)
Edison NJ 08817 1210 S Pine Island Road, Legal Dept
Plantation FL 33324

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

Name: C. T Corporation System
Office Address: 1200 South Pine Island Road
Plantation, Florida 33324
(City) (Zip code)

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.

C. T Corporation System
By: /s/ STEPHEN RULLIS STEPHEN RULLIS, VP & ASST. SECY.
(Registered agent's signature)

2023-01-27 AM 9:35

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]:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<input checked="" type="checkbox"/> Manager	Name: <u>Alexander Braun</u>	<input checked="" type="checkbox"/> Manager	Name: <u>Thomas Calibeo</u>
<input type="checkbox"/> Member	Address: <u>2147 Route 27, Suite 401</u>	<input type="checkbox"/> Member	Address: <u>2147 Route 27, Suite 401</u>
<input type="checkbox"/> Authorized	<u>Edison NJ 08817</u>	<input type="checkbox"/> Authorized	<u>Edison NJ 08817</u>
Person	<u></u>	Person	<u></u>
<input type="checkbox"/> Other <u></u>	<input type="checkbox"/> Other <u></u>	<input type="checkbox"/> Other <u></u>	<input type="checkbox"/> Other <u></u>
 <input checked="" type="checkbox"/> Manager	Name: <u>Robert Whitaker</u>	 <input type="checkbox"/> Manager	Name: <u>C Marcus Stanley</u>
<input type="checkbox"/> Member	Address: <u>1210 S Pine Island Rd, Legal</u>	<input type="checkbox"/> Member	Address: <u>1210 S Pine Island Rd, Legal</u>
<input type="checkbox"/> Authorized	<u>Plantation FL 33324</u>	<input checked="" type="checkbox"/> Authorized	<u>Plantation FL 33324</u>
Person	<u></u>	Person	<u></u>
<input type="checkbox"/> Other <u></u>	<input type="checkbox"/> Other <u></u>	<input type="checkbox"/> Other <u></u>	<input type="checkbox"/> Other <u></u>
 <input type="checkbox"/> Manager	Name: <u>Kevin Coles</u>	 <input type="checkbox"/> Manager	Name: <u></u>
<input type="checkbox"/> Member	Address: <u>1210 S Pine Island Rd, Legal</u>	<input type="checkbox"/> Member	Address: <u></u>
<input checked="" type="checkbox"/> Authorized	<u>Plantation FL 33324</u>	<input type="checkbox"/> Authorized	<u></u>
Person	<u></u>	Person	<u></u>
<input type="checkbox"/> Other <u></u>	<input type="checkbox"/> Other <u></u>	<input type="checkbox"/> Other <u></u>	<input type="checkbox"/> Other <u></u>

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.



Signature of an authorized person

C. Marcus Stanley

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "HILLEBRAND GORI USA 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 TWENTIETH DAY OF JANUARY, A.D. 2023.

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



3034186 8300

SR# 20230205670

You may verify this certificate online at corp.delaware.gov/authver.shtmlA handwritten signature in black ink, appearing to read "JBullock", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Jeffrey W. Bullock, Secretary of State

Authentication: 202539035

Date: 01-20-23