

P20000087079

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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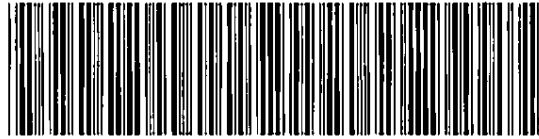
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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SECRETARY OF STATE  
TALLAHASSEE, FL

N CULLIGAN

NOV 10 2020

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

ACCOUNT NO. : I20000000195

REFERENCE : 502247 8282869

AUTHORIZATION :

COST LIMIT : \$ 70.00

ORDER DATE : November 9, 2020

ORDER TIME : 12:55 PM

ORDER NO. : 502247-001

CUSTOMER NO: 8282869

DOMESTIC FILING

NAME: HARLAND & WOLFF (USA) INC.

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION  
       CERTIFICATE OF LIMITED PARTNERSHIP  
       ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY - per Amanda Grant CC - 11/10/20  
XX PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker - EXT.

EXAMINER'S INITIALS: \_\_\_\_\_

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**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I NAME**

The name of the corporation shall be: HARLAND & WOLFF (USA) INC.

SECRETARY OF STATE  
TALLAHASSEE, FL

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

8th Floor Northern & Shell Building  
10 Lower Thames Street

London, EC3R 6AF United Kingdom

Mailing address, if different is:

8th Floor Northern & Shell Building  
10 Lower Thames Street

London, EC3R 6AF United Kingdom

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Any and all lawful business

**ARTICLE IV SHARES**

The number of shares of stock is: 1500

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: President/Director Name and Title: \_\_\_\_\_

Address John Wood Address: \_\_\_\_\_

31 Sixty Acres, Prestwood

Great Missenden, HP16 OPE United Kingdom

Name and Title: CFO/Director Name and Title: \_\_\_\_\_

Address Arun Raman Address: \_\_\_\_\_

72 Burdon Lane, Cheam

Sutton, SM2 7BZ United Kingdom

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FL

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: Corporation Service Company

Address: 1201 Hays Street

Tallahassee, FL 32301

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: Shashank Krishna

Address: 110 Bishopsgate, McDermott Will & Eme

London, EC2N 4AY United Kingdom

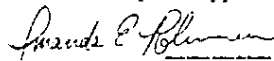
**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

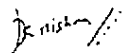


Required Signature/Registered Agent

10 November 2020

Date

*I submit this document and affirm that the facts stated herein are true. I am aware that the 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.*



Shashank Krishna

Required Signature/Incorporator

9 November 2020

Date