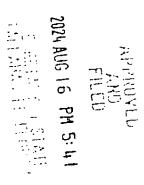
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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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799 1 6 **2024** .C. Srumbley

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 08/16/2024	_		
		₩ALK IN	
ENTITY NAME Sparts	a Commodities Ameri	cas Co.	
DOCUMENT NUMBER			
	PLEASE FILE TI	HE ATTACHED AND RETURN	
xxxxxxxx	Plain Copy		
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	Certificate of Status		
	Certified Copy of Art Certificate of Good St		
	APOSTILLE' / I	NOTARIAL CERTIFICATION	
COUNTRY OF DESTINA	TTION		
NUMBER OF CERTIFICA	ATES REQUESTED		
TOTAL OWED \$70		ACCOUNT #: I201600000	72
		S 8 7/10	
Please call Tina at	the above number for	any issues or concerns. Thank you	so much!

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.

SPARTA COM	MODITIES AMERICAS CO.				
	orporation; must include "INCORPORATED, orp," "Inc," "Co," or "Corp.")	" "COMPAN	Y," "CORPORATIO	N,"	
(If name unavaila	able in Florida, enter alternate corporate name	adopted for th	e purpose of transactii	ng business in Florida)	
Delaware		3. 16-1124166			
	(State or country under the law of which it is incorporated)		(FEI number, if applicable)		
01/21/2022	5.				
(Date of incorporation)		(Da	(Date of duration, if other than perpetual)		
	(Date first transacted business i (SEE SECTIONS 607.1501 & 607.1			lity)	
77 rue de Lyon, C	Geneva, Switzerland 1203				
		ice <u>street</u> add	ress)		
	(Current maili	ng address, if o	lifferent)	202	
				2024 AUG	
. Name and stree	<u>et address</u> of Florida registered agent: (P.C	D. Box <u>NOT</u>	_acceptable)	616 FIL	
Name:	Registered Agents Inc.				
ACC A .I.I	7901 4th Street N, Suite 300				
Office Address:			22702	<u> </u>	
	St Peterburg	FL ,	33702		
	(City)		(Zip code)		

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.

Registered Agents Inc.

By: David Roberts David Roberts, Assistant Secretary

(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]:

Docusign Envelope ID: 5D6B6DCA-89D9-4571-B660-EDA218190E08 A. DIRECTORS Name: Henri Philippe Elink Schuurman □ Chairman Name: _____ □Chairman 77 rue de Lyon, Address: _____ Address: □ Vice Chairman ☐ Vice Chairman Geneva, Switzerland 1203 ■Director □ Director □President President □ Vice President □Vice President _____ ☐ Secretary □Treasurer □Treasurer □ Secretary CEO Other_ □Other □Other _____ □Other _____ Miles Moseley Name: Name: _____ □Chairman Chairman 77 rue de Lvon. Address: □Vice Chairman ☐ Vice Chairman Address: _____ Geneva, Switzerland 1203 ■ Director Director □President □ President □Vice President _ ☐ Vice President ■Secretary Treasurer ☐ Secretary □ Treasurer □Other _____ □Other _____ □Other Other Luca Ceschina Name: □ Chairman □Chairman Name: 77 rue de Lyon, □Vice Chairman Address: □Vice Chairman Address: ______ Geneva, Switzerland 1203 □ Director ☐ Director □President □ President □ Vice President __ □Vice President □Secretary ■ Treasurer ☐ Secretary □Treasurer □Other _____ □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.

12.	 DocuSigned by:	
	Henn Plulppe Edinbor Schulmennetar Officer	

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.

Henri Philippe Elink Schuurman, President and Chief Executive Officer

(Typed or printed name and capacity of person signing application)

<u>Delaware</u>

The First State

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

DELAWARE, DO HEREBY CERTIFY "SPARTA COMMODITIES AMERICAS CO." 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 TWENTY-EIGHTH DAY OF JUNE,

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 "SPARTA

COMMODITIES AMERICAS CO." WAS INCORPORATED ON THE TWENTY-FIRST DAY

OF JANUARY, A.D. 2022.

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

Authentication: 203826828

Date: 06-28-24