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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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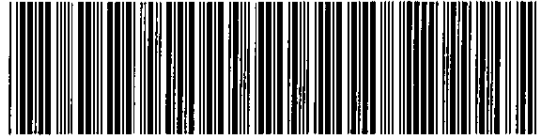
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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J. Shivers FEB 17 2009

*sent Feb 4 09*

**COVER LETTER**

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** 746796 ONTARIO LIMITED INC  
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

WALTER BOYCE  
(Name of Person)  
746796 ONTARIO LIMITED  
(Firm/Company)  
SUITE 200 - 368 SLATER STREET  
(Address)  
OTTAWA ONTARIO CANADA K1R5C1  
(City/State and Zip code)

For further information concerning this matter, please call:

WALTER BOYCE at (613) 236-3151  
(Name of Person) (Area Code & Daytime Telephone Number)

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**STREET/COURIER ADDRESS:**  
New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**  
New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- \$70.00 Filing Fee
- \$78.75 Filing Fee & Certificate of Status
- \$78.75 Filing Fee & Certified Copy
- \$87.50 Filing Fee, Certificate of Status & Certified Copy

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.

1. 746796 ONTARIO LIMITED INC
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co," or "Corp.")

N/A

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. PROVINCE OF ONTARIO, CANADA
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. DECEMBER 30, 1987 (Date of incorporation) 5. PERPETUAL (Duration: Year corp. will cease to exist or "perpetual")

6. JANUARY 15, 2009 (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S. to determine penalty liability)

7. 200 - 368 SLATER STREET, OTTAWA, ONTARIO, CANADA K1R5C1 (Principal office address)

AS ABOVE

(Current mailing address)

8. TO ACT AS GENERAL PARTNER OF "MONTCLAIRE LIMITED PARTNERSHIP" (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

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

Name: W. F. FORESMAN

Office Address: 1040 6TH AVE NORTH

NAPLES, Florida 34102 (City) (Zip code)

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10. 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.

William F Foresman
(Registered agent's signature)

11. 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.

12. Names and business addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: \_\_\_\_\_

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

Vice Chairman: \_\_\_\_\_

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

Director: WALTER RUSSELL BOYCE

Address: 19 CRESCENT HEIGHTS

OTTAWA, ONTARIO, CANADA K1S3G7

Director: \_\_\_\_\_

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

**B. OFFICERS**

President: WALTER RUSSELL BOYCE

Address: 19 CRESCENT HEIGHTS

OTTAWA, ONTARIO, CANADA K1S3G7

Vice President: \_\_\_\_\_

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

Secretary: WALTER RUSSELL BOYCE

Address: 19 CRESCENT HEIGHTS, OTTAWA, ONTARIO, CANADA K1S3G7

Treasurer: WALTER RUSSELL BOYCE

Address: 19 CRESCENT HEIGHTS, OTTAWA, ONTARIO, CANADA K1S3G7

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**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. *Walter Russell Boyle* Feb 9 09  
(Signature of Director or Officer listed in number 12 of the application)

14. WALTER RUSSELL BOYCE - DIRECTOR  
(Typed or printed name and capacity of person signing application)

Request ID: 011008788  
Demande n° :  
Transaction ID: 37550852  
Transaction n° :  
Category ID: CT  
Catégorie :

Province of Ontario  
Province de l'Ontario  
Ministry of Government Services  
Ministère des Services gouvernementaux

Date Report Produced: 2009/02/04  
Document produit le :  
Time Report Produced: 11:27:26  
Imprimé à :

## CERTIFICATE OF STATUS ATTESTATION DU STATUT JURIDIQUE

This is to certify that according to the records of the Ministry of Government Services

D'après les dossiers du Ministère des Services gouvernementaux, nous attestons que la société

**7 4 6 7 9 6 O N T A R I O L I M I T E D**

Ontario Corporation Number

Numéro matricule de la société (Ontario)

**0 0 0 7 4 6 7 9 6**

is a corporation incorporated, amalgamated or continued under the laws of the Province of Ontario.

est une société constituée, prorogée ou née d'une fusion aux termes des lois de la Province de l'Ontario.

The corporation came into existence on

La société a été fondée le

**DECEMBER 30 DÉCEMBRE, 1987**

and has not been dissolved.

et n'est pas dissoute.

Dated

Fait le

**FEBRUARY 04 FÉVRIER, 2009**



Director  
Directrice