

F13000002832

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

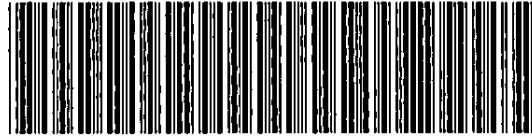
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



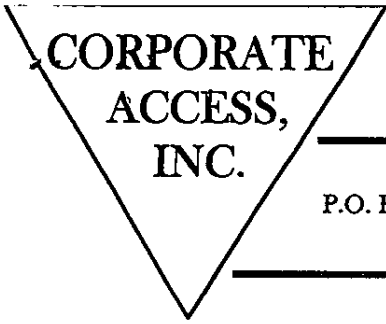
200248955402

06/28/13--01020--012 **2070.00

RECEIVED
DEPARTMENT OF STATE
13 JUN 28 AM 12:35

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
13 JUN 28 AM 9:11

MPD
7/1/13



"When you need ACCESS to the world"

236 East 6th Avenue . Tallahassee, Florida 32303
P.O. Box 37066 (32315-7066) (850) 222-2666 or (800) 969-1666 . Fax (850) 222-1406

13 JUN 28 AM 9:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

WALK IN

PICK UP:

06/28 Emily

CERTIFIED COPY

PHOTOCOPY

CUS

FILING

Inc

1. 8528101 Canada, Inc.
(CORPORATE NAME AND DOCUMENT #)

2. _____
(CORPORATE NAME AND DOCUMENT #)

3. _____
(CORPORATE NAME AND DOCUMENT #)

4. _____
(CORPORATE NAME AND DOCUMENT #)

5. _____
(CORPORATE NAME AND DOCUMENT #)

6. _____
(CORPORATE NAME AND DOCUMENT #)

SPECIAL INSTRUCTIONS:

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.

8528101 Canada Inc.

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

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

2. Canada 3. N/A (State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 5/23/2013 5. Perpetual (Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

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

7. 74 rue D'Alexandrie, Laval, Quebec H7K 0B3 Canada (Principal office address)

74 rue D'Alexandrie, Laval, Quebec H7K 0B3 Canada (Current mailing address)

8. own real estate (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: Matthew Bell

Office Address: 109 Ambersweet Way, #401

Davenport, Florida 33897 (City) (Zip code)

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.

[Signature] (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.

FILED JUN 28 AM 9:11 SECRETARY OF STATE TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: Angelo Manna

Address: 74 rue D'Alexandrie, Laval, Quebec H7K 0B3 Canada

Vice Chairman: Dario Manna

Address: 399 rue Damien Cyr, Laval, Quebec H7L 6H3 Canada

Director: Raffaele Sabatino

Address: 3851 L'Adjudant, Laval, Quebec H7E 5L2 Canada

Director: _____

Address: _____

B. OFFICERS

President: Angelo Manna

Address: 74 rue D'Alexandrie, Laval, Quebec H7K 0B3 Canada

Vice President: Dario Manna

Address: 399 rue Damien Cyr, Laval, Quebec H7L 6H3 Canada

Secretary: Raffaele Sabatino

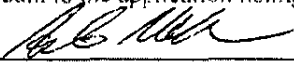
Address: 3851 L'Adjudant, Laval, Quebec H7E 5L2 Canada

Treasurer: _____

Address: _____

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

13. _____


Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 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.

14. _____

Angelo Manna

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

FILED

13 JUN 28 AM 9:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

13 JUN 28 AM 9:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Certificate of Compliance

*Canada Business Corporations Act
s. 263.1*

Certificat de conformité

*Loi canadienne sur les sociétés par actions
art. 263.1*

8528101 Canada Inc.

Corporate name / Dénomination sociale

852810-1

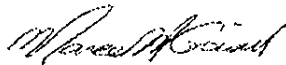
Corporation number / Numéro de société

I HEREBY CERTIFY that the corporation
named above:

- exists under the *Canada Business Corporations Act*;
- has filed the required annual returns; and
- has paid all prescribed fees required.

JE CERTIFIE, par la présente, que la société ci-
dessus mentionnée :

- existe en vertu de la *Loi canadienne sur les sociétés par actions*;
- a déposé les rapports annuels exigés; et
- a acquitté les droits prescrits.



Marcie Girouard

Director / Directeur

2013-06-18

Issuance date (YYYY-MM-DD)
Date d'émission (AAAA-MM-JJ)