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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: 9183-4317 Quebec 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," or "Certificate of Good Standing" 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:	
Andrew Timenez Esq. Name of Person	
Firm/Company	—
One Francial Plaza 100 St 3rd Ave Suit 1514 Address	_
Foret Landerdale, FL 33394 City/State and Zip code	_
Foret Landerdale, FL 33394 City/State and Zip code AMDREW @ JIMENEZLAW OFFICES OM E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Andrew Timenez at (954) 908 3370 Name of Person Area Code Daytime Telephone Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 MAILING ADDRESS: Registration 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 & ☐ \$78.75 Filing Fee & ☐ \$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. 9183-4317 Quebec Inc. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") 9183-4317 Quebec Co. (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) (State or country under the law of which it is incorporated)
8 June, 2007 (FEI number, if applicable) (Date of duration, if other than perpetual) (Date of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 263 Rue de La Mairie, Levis, Quebec G6C 1T1 (Principal office address) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Andrew Jimenez Name: One Financial Plaza, 100 SE Third Avenue, Suite 1514 Office Address: 33394 Fort Lauderdule

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 agent's signature)

, Florida

10. Attached is a certificate of existence duly anthenticated, 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. Names and business addresses of officers and/or directors:

	ECTORS Tony Lavoie		
Chairman	4655 Reine Malouin, Levis, Quebec, G6W 0E4		
Vice Chai	irman:		
Address:		<u> </u>	
Director:	Benoit Simard		
	214 Chemin dea Granites, Lac Beauport, Quebec, G3B 0G3		
5 .	Patrick Dufresne		
	632 Marie Antoinette, Pintendre, Quebec G6C 1K5		
		<u></u>	
B. OFF	ICERS		
President	:		
Address:		•	HAR 2
Vice Pres	sident:		
			, č
Audits:		;;; ;;;	6
Secretary	r		
Address:		 -	
Treasure	rs		
Address:			
NOTE;	If necessary, you may attach an addendum to the application listing additional officers and/or	r di re ctor	rs.
12. To	ny lavoie		
	ASADOS853FC4C8 Signature of Director or Officer	facto etati	ed herein
are true	cer or director signing this document (and who is listed in number 11 above) affirms that the and that he or she is aware that false information submitted in a document to the Department degree felony as provided for in s.817.155, F.S.	of State of	constitutes
	nny Lavoie Director		
	(Typed or printed name and capacity of person signing application)		

Certificat d'attestation

Loi sur la publicité légale des entreprises (RLRQ, chapitre P-44.1)

J'atteste que l'entreprise portant le nom

9183-4317 QUÉBEC INC.

- est immatriculée depuis le 8 juin 2007 .
- est en défaut de déposer une déclaration de mise à jour annuelle pour 2010.
- n'est pas en défaut de se conformer à une demande qui lui a été faite en vertu de l'article 73.
- n'est pas en voie de dissolution.
- · n'est pas radiée.

Numéro de certification: 340020676

Le numéro de certification ci-dessus vous permet de consulter en tout temps ce document certifié à l'aide du service en ligne Vérifier un numéro de certification du Registraire des entreprises.

Fait le 19 mars 2018 pour le numéro d'entreprise du Québec 1164490295.

Registraire des entreprises



REZ-130 (2017-08)

Certificate of attestation

Law on the legal advertising of enterprises (RLRQ, Chapter P-44.1)

I attest that the enterprise named

9183-4317 QUEBEC INC.

- Is registered since June 8, 2007.
- Is in default of filing an updated annual report for the year 2010.
- Is not in default of conformity to the request made in virtue of article 73.
- Is not in the process of dissolution.
- Is not dissolved.

Certification number: 340020676

The above certificate number allows you to consult at any time this certified document through our online services Verify a certification number of the Enterprise Register.

Made on March 19, 2018 under the Quebec enterprise number 1164490295

Quebec Enterprise Register

Revenue Quebec

CERTIFICATE OF ACCURATE TRANSLATION

The undersigned, <u>JOSIPA MARASOVIC</u> certifies that s/he is fluent in the <u>FRENCH</u> and English languages, that s/he made the attached translation from the attached document in the <u>FRENCH</u> language and, hereby, that the same is a true and complete translation to the best of his/her knowledge, ability, and beliek.

(Signature of Translator)

STATE OF FLORIDA

COUNTY OF BROWARD

Sworn to (or affirmed) and subscribed before me this ______day of March_____, 2018, by JOSIPA MARASOVIC.

Notary Public

Personally Known OR Produced Identification

ANDREW L. JIMENEZ
MY COMMISSION # FF192091
EXPIRES: January 22, 2019

Type of Identification Produced