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(Requestor's Name)			
(Ac	ldress)		
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(Ci	ty/State/Zip/Phone	#)	
PICK-UP	TIAW [MAIL	
(Bu	siness Entity Name	e)	
(Do	ocument Number)		
Certified Copies	Certificates (of Status	
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Special Instructions to	Filing Officer:		
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Office Use Only



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2019 OCT 15 PH 4: 48

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Y SCOTT OCT 1 6 2019 CORPORATION SERVICE COMPANY
1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

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ACCOUNT NO. : 12000000195

REFERENCE : 011400

808512

AUTHORIZATION

COST LIMIT : (5) 7

ORDER TIME : 12:49 PM

ORDER DATE: October 15, 2019

ORDER NO. : 011400-005

CUSTOMER NO: 8085122

FOREIGN FILINGS

NAME: TRACTION ON DEMAND US INC

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Kadesha Roberson -- EXT# 62980

EXAMINER:

COVER LETTER

TO:	Registration Se						
	Division of Co	•					
		on Demand US Inc					
SUBJ	ECT:	Nome	. f. a a a a i a		inaluda au CC		 -
		ivaine o	и согрогацог	ı - must	include suffix		
Dear S	Sir or Madam:					, ~	
"Certif	ficate of Existenc	tion by Foreign Co ee," or "Certificate on corporation to tr	of Good Star	nding" a	nd check are sui	act Business in Fibration builted to registe	forida,
	return all corres Clasone	pondence concerni	ng this matte	r to the I	following:	SEE FLURIDA	PILE
	-		Name of	Person			841
Tractio	n On Demand US	Inc				IÑA	æ
			Firm/Com	many	·		
500-27	00 Production Wa	y,	T TITLE COLL	rpun,			
Burnab	y, BC V5A 0C2, 0	`anada	Addre	ess			
			City/State a	nd Zip c	ode		
lklason	e@tractionondem:	and.com	·	•			
		E-mail address:	(to be used	for futur	e annual report	notification)	
For fur	rther information	concerning this ma	atter, please o	call:	·		
			at ()			
	Name of Perso		Area Cod	e′ —	Daytime Telep	ohone Number	
	STREET/COU Registration Se Division of Cor Clifton Buildin 2661 Executive Tallahassee, FL	porations g Center Circle	3 :		MAILING A Registration S Division of C P.O. Box 632 Tallahassee, I	Section orporations 7	
Enclos	ed is a check for	the following amo	unt:				
□ \$70	0.00 Filing Fee	□ \$78.75 Filing Certificate o			5 Filing Fee & ied Copy	□ \$87.50 Fil Certificate Certified	e of Status &

under the law of which it is incorporated.

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Enter name of c "Inc" "Co" "C	orporation; must include "INCORPORATED," "orp." "Inc." "Co," or "Corp.")	COMPANY," "CORPORATION,"	
Delaware	able in Florida, enter alternate corporate name add 38 3	-3933363	
(State or countr May 30, 2014	y under the law of which it is incorporated) 5 of incorporation)	(FEI number, if applicable)	n I
May 24, 2019	of incorporation)		(ual)
	(SEE SECTIONS 607.1501 & 607.1502 BLVD W, Houston, TX, 77077 (Principal tion Way, Burnaby, Canada, V5A 0C2	office address)	
	(Current mailing	ddress, if different)	
	et address of Florida registered agent: (P.O. Corporation Service Company	Box <u>NOT</u> acceptable)	
Name and <u>stree</u> Name: ffice Address:	Corporation Service Company 1201 Hays Street	Box <u>NOT</u> acceptable)	
Name:	Corporation Service Company 1201 Hays Street Tallahassee		
Name:	Corporation Service Company 1201 Hays Street		
Name: ffice Address: Registered againg been namesignated in this orther agree to contact the second secon	Corporation Service Company 1201 Hays Street Tallahassee (City) ent's acceptance: red as registered agent and to accept service application, I hereby accept the appointme, comply with the provisions of all statutes relations with and accept the obligations of a		n this capacity nance of my

the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction

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

A. DIRECTORS Gregory Malpass	
Chairman:500-2700 Production Way, Burnaby, Canada, V5A 0C2	
Address:	
Vice Chairman:	
Address:	
Director:	2019 OCT TĂL LAH
Address:	OCT OCT
	15
Director:	EC. PH.
Address:	G: ÷
	
B. OFFICERS	
President: Gregory Malpass	
Address: 500-2700 Production Way, Burnaby, Canada, V5A	
Addicas.	
Vian Pensidant	, 1784-E
Vice President:	
Address:	
Secretary:	
Address:	
Treasurer:	
Address:	
NOTE: Homeworstery, you may attach an addendum to the application	ation listing additional officers and/or directors.
12. Signature of Director	or Officer
The officer or director signing this document (and who is listed i are true and that he or she is aware that false information submitt a third degree felony as provided for in s.817.155, F.S.	n number 11 above) affirms that the facts stated herein
13. Gregory Malpass CEO	



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

DELAWARE, DO HEREBY CERTIFY "TRACTION ON DEMAND US INC." 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 FIFTEENTH DAY OF OCTOBER, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE TO BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TRACTION ON DEMAND US INC." WAS INCORPORATED ON THE THIRTIETH DAY OF MAY, A.D. 2014.

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

Authentication: 203792772

Date: 10-15-19