## F230000004690

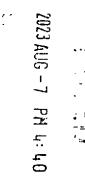
(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					





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## **COVER LETTER**

	istration Section sion of Corporations				
SUBJECT	ONEKA TECHNOLOGIES	US INC.			
SUBJECT		of corporation	- must include suffix	<del></del>	
Dear Sir or l	Madam:				
"Certificate	d "Application by Foreign Co of Existence," or "Certificate nced foreign corporation to tr	of Good Stand	ling" and check are sub-		
Please returi	n all correspondence concerni	ng this matter	to the following:		
MYCORPOR	RATION				
		Name of F	Person		
	<del></del> ,	Firm/Comp	pany		
26025 MUR	EAU RD STE 120				
<del> </del>		Addre	SS		
CALABASA	S, CA 91302				
		City/State an	d Zip code		
PROCESSIN	G@MYCORPORATION.COM				
	E-mail address	: (to be used fo	or future annual report n	otification)	
For further i	nformation concerning this m	atter, please ca	ill:		
PROCESSING at ( 877		692-6772			
Nai	ne of Person	Area Code	Daytime Telepl	none Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			Registration Solution of Co Division of Co P.O. Box 6327	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Enclosed is Please make o	a check for the following amoreheck payable to: FLORIDA DI iling Fee	<b>EPARTMENT</b> g Fee & □	OF STATE \$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.

(If name unavaila	ble in Florida, enter alternate corporate name a	adopted for the purpose of transacting l	ousiness in Floric	la)	
Delaware 2.	3.			<del>.</del>	
(State or country	y under the law of which it is incorporated)	(FEI number, if appli	icable)		
4. 8/15/2019	5.				
(Date	8/15/2019 5. (Date of incorporation) (Date of duration, if other that				
6. N/A					
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.15	n Florida, if prior to registration) 102, F.S., to determine penalty liability	)		
7. 5425 Koblegard F	Road, Fort Pierce, FL 34951			<del></del>	
	•	ce <u>street</u> address)			
2365 rue Roy, Sh	erbrooke, Quebec J1K1B9 CANADA				
	(Current mailin	g address, if different)		207	
8. Name and street		2023 AUG - 7	•		
Name:	Legaline Corporate Services Inc.	<del></del>	٠.	-	
Office Address:	476 Riverside Ave.	·	:	PM 4: 40	ر ا ا
	Jacksonville	, Florida	•	<del>-</del>	
	(City)	(Zip code)	<del></del>	0	
Having been nam designated in this further agree to c	ent's acceptance: ned as registered agent and to accept servi e application, I hereby accept the appoints comply with the provisions of all statutes r with and accept the obligations of my po	nent as registered agent and agree relative to the proper and complete	to act in this c	apacity.	Ι

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.

<sup>11.</sup> For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

## A. DIRECTORS Name: \_\_\_ Serge Laporte □ Chairman Chairman 254 Av. Vista Pointe-Claire 5425 Koblegard Road Address: □ Vice Chairman Address: ☐ Vice Chairman Québec H9R 5R7 CANADA Fort Pierce, FL 34951 Director □ Director President □ President □Vice President □Vice President \_ □Treasurer ☐ Treasurer ☐ Secretary ☐Secretary ☐Other \_\_\_\_\_ □Other ☐ Other \_\_\_\_\_ □Other \_\_\_\_\_ Colin Ryan Alain-Olivier Desbois ☐ Chairman Name: Chairman Name: 570 Rue de Chambly 335 Av. Kensington Westmount Address: \_ □Vice Chairman Address: □ Vice Chairman Québec H3Z 2H2 CANADA Sherbrooke, Québec J1J 2Y2 **Director ™**Director CANADA □ President ☐ President ☐ Vice President ☐ Vice President ☐ Secretary □Treasurer ☐ Secretary ☐ Treasurer Other □ Other \_\_\_\_\_ □Other \_\_\_\_\_ Name: Lidija Marušić □ Chairman □ Chairman Name: □ Vice Chairman Address: 6291 Yukon St., □ Vice Chairman Address: \_\_\_\_\_ Halifax, NS B3L 1E9 CANADA □ Director ■ Director □ President □ President □ Vice President ☐ Vice President ☐ Secretary ☐ Treasurer □ Secretary ☐Treasurer □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. Signature of Director or 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.

Dragan Tutic, President

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

DELAWARE, DO HEREBY CERTIFY "ONEKA TECHNOLOGIES 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 TWENTY-FIFTH DAY OF JULY, A.D. 2023.



Authentication: 203824351

Date: 07-25-23