F01000002189

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 1254268 ONTARIO LIMITED
(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:

300003943383--1
-04/02/01--01097--005
*****87.50 *****87.50

LINDA MAUGHAN
(Name of Person)

G.N.D. PRODUCTS W01-7638
(Firm/Company)

8374 MARKET STREET #501
(Address)

BRADENTON FLORIDA 34202-5137
(City/State and Zip code)

For further information concerning this matter, please call:

LINDA MAUGHAN at (800) 922-6281
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

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

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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

mtn
4/25

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

April 5, 2001

LINDA MAUGHAN
8374 MARKET STREET #501
BRADENTON, FL 34202-5137

SUBJECT: 1254268 ONTARIO LIMITED
Ref. Number: W01000007638

We have received your document for 1254268 ONTARIO LIMITED and your check(s) totaling $87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6097.

Michael Mays
Document Specialist

Letter Number: 701A00020152

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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. 1254268 ONTARIO LIMITED INC.
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)

2. ONTARIO CANADA
(State or country under the law of which it is incorporated)

3. CANADIAN BUSINESS NUMBER: 89133 0227
(FEI number, if applicable)

4. MAY 14 1998
(Date of incorporation)

5. PERPETUAL
(Duration: Year corp. will cease to exist or "perpetual")

6. UPON QUALIFICATION
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 8178 SCHISLER ROAD WELLAND ONTARIO CANADA L3B5N4
(Principal office address)

P.O. BOX 172 WELLAND ONTARIO CANADA L3B 5P2
(Current mailing address)

8. MANUFACTURE AND WHOLESALE SALES OF MOUNTED POSTERS ILLUMINATED
(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 or Mail Drop Box **NOT** acceptable)

Name: LINDA MAUGHAN

Office Address: 8374 MARKET ST. #501

BRADENTON (City), Florida 34202-5137 (Zip code)

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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.

Linda Maughan
(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: PATRICK DENNAHOWER

Address: 8178 SCHISLER ROAD
WELLAND ONTARIO CANADA L3B 5N4

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: PATRICK DENNAHOWER

Address: 8178 SCHISLER RD
WELLAND ONTARIO CANADA L3B 5N4

Vice President: LINDA MAUGHAN

Address: 8374 MARKET ST. #501 BRADENTON FLORIDA 34202-5137

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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TALLAHASSEE, FLORIDA

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

13. Patrick Dennahower
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. PATRICK DENNAHOWER
(Typed or printed name and capacity of person signing application)

Canada Customs and Revenue Agency | Agence des douanes et du revenu du Canada

89133 0227 RT0001

1254268 ONTARIO LIMITED
8178 SCHISLER ROAD,
WELLAND ON L3B 5N4

ST. CATHARINES
TAX SERVICES OFFICE
32 CHURCH STREET
P.O. BOX 3038
ST. CATHARINES
ON
L2R 3B9

TOLL FREE: (800) 959-5525
SANS FRAIS: (800) 959-7775
FAX: (905) 688-5996

MARCH 13, 2001

WE HAVE APPROVED YOUR APPLICATION FOR GOODS AND SERVICES TAX/HARMONIZED SALES TAX (GST/HST) REGISTRATION. YOUR REGISTRATION IS EFFECTIVE MARCH 12, 2001.

YOUR BUSINESS NUMBER IS: 89133 0227 RT0001

BASED ON THE INFORMATION YOU PROVIDED ON YOUR REGISTRATION FORM, WE HAVE ASSIGNED YOU A QUARTERLY REPORTING PERIOD.

WE WILL SEND YOU A GST/HST RETURN BEFORE THE END OF EACH OF YOUR GST/HST REPORTING PERIODS. YOUR FIRST GST/HST RETURN WILL COVER THE PERIOD FROM MARCH 12, 2001 TO MAY 30, 2001.
THIS RETURN, AND ANY GST/HST THAT YOU OWE FOR THAT PERIOD IS DUE JULY 3, 2001.

IF YOU MAIL US YOUR GST/HST PAYMENT, WE HAVE TO RECEIVE IT BY THE DUE DATE. WE WILL NOT ACCEPT A POSTMARK AS PROOF OF THE DATE OF RECEIPT. IF YOU CHOOSE TO MAKE YOUR PAYMENT AT A FINANCIAL INSTITUTION, YOU HAVE TO MAKE THE PAYMENT NO LATER THAN THE DUE DATE. IF YOU MAKE A PAYMENT OF $50,000 OR MORE, YOU HAVE TO PAY AT A FINANCIAL INSTITUTION.

IF YOU HAVE ANY QUESTIONS OR NEED MORE INFORMATION, PLEASE CONTACT THE ABOVE TAX SERVICES OFFICE.

ROB WRIGHT
COMMISSIONER OF CUSTOMS AND REVENUE

SI VOUS DESIREZ DES RENSEIGNEMENTS EN FRANCAIS, VEUILLEZ COMMUNIQUER AVEC LE BUREAU MENTIONNE CI-DESSUS.

Canada