2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # F04000002077 FILED 1. Entity Name WESTWIND PARTNERS (USA) INC. 06 NOV 20 AMII: 42 LUIT PART OF STATE Principal Place of Business Mailing Address FALLAHASSEE, FLORIDA C/O WESTWIND PARTNERS, INC. C/O WESTWIND PARTNERS, INC. 70 YORK ST., 10TH FL, TORONTO, ONTARIO 70 YORK ST., 10TH FL, TORONTO, ONTARIO CANADA M5J 1S9, CANADA M5J 1S9, 2. Principal Place of Business 3. Mailing Address Suite Ant # etc. Suite. Apt. #. etc. 4. FEI Number Applied For City & State City & State NOT APPLICABLE Not Applicable Country \$8.75 Additional Zip Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 Zip Code City FI 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent SIGNATURE. DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. FILE NOW!!! FEE IS \$150.00 After January 1, 2007, Fee will be \$300.00 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. Delete ▼ Change ☐ Addition PD TITLE TITLE ROWLANDS, H. ALEXANDER TO YORK STREET HUBBLE BOOK 951 TORONTO ONTO CANADAULA **! ROWLANDS, H. ALEXANDER NAME NAME STREET ADDRESS 70 YORK STREET, 10TH FLOOR STREET ADDRESS see attached TORONTO, ONT., CANADA, CITY-ST-ZIP ****158.75** CITY-ST-ZIP P. CCO. DIRECTOR OF COMPLANCE IN Change Addition ☐ Delete TITLE TITLE EISENSTAT, JULIE HARRIS, KEITH R NAME NAME 70 YORK STREET, 10TH FLOOR STREET ADDRESS STREET ADDRESS 70 YORK STREET, 10TH FLOOR See a Hadred CITY-ST-ZIP TORONTO, ONT., CANADA, CITY-ST-ZIP TORONTO, ONT. CANADA. ☐ Addition ☐ Change cco Delete TITLE TITLE FUSENSTAT, JULIE NAME NAME 70 YORK STREET, 10TH FLOOR See attacked STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TORONTO, ONT., CANADA, CITY-ST-ZIP ☐ Delete TITLE Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ■ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. 416-818-3070 NG OFFICER OR DIRECTOR SIGNATURE AND TYPED OR PRINTED N.