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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

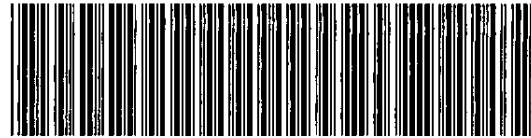
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SECRETARY OF STATE
DIVISION OF CORPORATIONS
2011 MAR -4 AM 10:31

3/10/11

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: 62349 Newfoundland and Labrador Corp
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:

Valarie Norman

Name of Person

Firm/Company

2 BRUCE STREET

Address

MOUNT Pearl, NL A1N 4T3

City/State and Zip code

vnorman@pinnacleoffice.ca

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Valarie Norman

Name of Person

at (709) 747-7460

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

New Filing 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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
11 MAR -4 AM 11:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

January 20, 2011

VALERIE NORMAN
2 BRUCE STREET
MOUNT PEARL, NL AIN 4T3,

SUBJECT: 62349 NEWFOUNDLAND AND LABRADOR CORP
Ref. Number: W11000003697

We have received your document for 62349 NEWFOUNDLAND AND LABRADOR CORP and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return the corrected original and one copy of 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) 245-6973.

Claretha Golden
Regulatory Specialist II
New Filing Section

Letter Number: 611A00001703

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2011 MAR -4 AM 10:31
SECRETARY OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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. 62349 Newfoundland and Labrador Corp
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. CANADA 3. 98-0670464
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. APRIL 22, 2010 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. August 24, 2010
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 2 BRUCE STREET
(Principal office address)

MOUNT PEARL, NL A1N 4T3
(Current mailing address)

8. Investment and rental property
(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 NOT acceptable)


Name: LANCE BOYER #1 DREAM HOMES

Office Address: 5511 W. IRLO BRONSON HWY

KISSIMMEE, Florida 34746
(City) (Zip code)

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.


(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.

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DIVISION OF CORPORATIONS
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12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman:

Don Carter

Address:

2 Bruce Street

Mount Pearl, NL AIN 4T3

Vice Chairman:

Mike Carter

Address:

2 Bruce Street

Mount Pearl, NL AIN 4T3

Director:

Valarie Norman

Address:

2 Bruce Street

Mount Pearl, NL AIN 4T3

Director:

Address:

B. OFFICERS

President:

Address:

Vice President:

Address:

Secretary:

Address:

Treasurer:

Address:

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

13.

Valarie Norman

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 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.

14.

Valarie Norman

(Typed or printed name and capacity of person signing application)

SECRETARY OF STATE
DIVISION OF CORPORATIONS

2011 MAR -4 AM 10:31



GOVERNMENT OF
NEWFOUNDLAND AND LABRADOR
Department of Government Services

SECRETARY OF STATE
DIVISION OF CORPORATIONS
2011 MAR -4 AM 10:31

CORPORATIONS ACT

CERTIFICATE OF GOOD STANDING

Corporation Name: **62349 NEWFOUNDLAND AND LABRADOR CORP**
Corporation Number: **62349**
Date of Incorporation: **April 22, 2010**

I certify that this Corporation has filed all documents required under the Corporations Act of Newfoundland and Labrador and is in Good Standing.

A handwritten signature in black ink, appearing to read "Ken Toyl", written over a horizontal line.

REGISTRAR OF COMPANIES
For Province of Newfoundland and Labrador
February 23, 2011