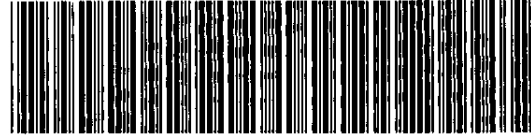


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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: 7800274 CANADA INC
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:

MELODIE HOLT
Name of Person

7800274 CANADA INC
Firm/Company

2745 CAMPER AVE
Address

KISSIMMEE, FLORIDA 34744
City/State and Zip code

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

For further information concerning this matter, please call:

MELODIE HOLT at (407) 406-5992
Name of Person Area Code & Daytime Telephone Number

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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

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

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. 7800274 CANADA INCORPORATED
(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. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. MARCH 09 2011 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. NO FLORIDA TRANSACTIONS YET
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 1017 CITE DES PINS, ST-LIN-LAURENTIDES, QC J5M 2E7
(Principal office address) CANADA
2745 CAMPER AVE, KISSIMMEE, FL 34744 USA
(Current mailing address)

8. VIRTUAL SERVICES COMPANY
(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: MELODIE HOLT

Office Address: 2745 CAMPER AVE

KISSIMMEE, Florida 34744
(City) (Zip code)


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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.

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: MELODIE HOLT

Address: 2745 CAMPER AVE

KISSIMMEE FL 34744

Vice President: RICHARD DURIVAGE

Address: 2745 CAMPER AVE

KISSIMMEE FL 34744

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

13. 

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. MELODIE HOLT PRESIDENT

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



Certificate of Existence

*Canada Business Corporations Act
s. 263.1(1)(c)*

Certificat d'existence

*Loi canadienne sur les sociétés par actions
art. 263.1(1)*

7800274 CANADA INCORPORATED

Corporate name / Dénomination sociale

780027-4

Corporation number / Numéro de société

I HEREBY CERTIFY that the corporation named above was in existence under the *Canada Business Corporations Act* on 2011-05-26 (YYYY-MM-DD).

JE CERTIFIE, par la présente, que la société ci-dessus mentionnée existait en vertu de la *Loi canadienne sur les sociétés par actions* le 2011-05-26 (AAAA-MM-JJ).

Aïssa Aomari

Deputy Director / Directeur adjoint

2011-05-26

Issuance date (YYYY-MM-DD)
Date d'émission (AAAA-MM-JJ)

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