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TO:	New Filing Sec Division of Cor				
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Dear S	ir or Madam:				
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To	Name of Person	Son at (4(6) Area Code &	709 - S	37(4 one Number
	STREET/COU New Filing Sect Division of Corp Clifton Building 2661 Executive Tallahassee, FL	porations Center Circle		MAILING A New Filing Se Division of Co P.O. Box 6322 Tallahassee, F	ection orporations 7
Enclos	ed is a check for t	he following amount:			
☐ ^{\$7}	70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Statu	s S78.7	5 Filing Fee & fied 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. EZ Cat Inc.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," 1. "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) Canada
(State or country under the law of which it is incorporated)

(FEI number, if applicable) 4. Sept 27, 2007 5. <u>Perpetual</u> (Duration: Year corp. will cease to exist or "been compared to the compared to (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 249 Bayshore Road Churchill Ol (Principal office address) Same as above
(Current mailing address) 9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: 832 Stafford Drive

Stuart, Florida 34996
(7in code) Office Address: 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:	APH-Cycle ANE
A. DIRECTORS	rileU
Chairman:	F1 JUL 25 PM 2: 45
Address:	SECRETARY UF STATE TALLAHASSEE, FLORIDA
Vice Chairman:	
Address:	
Director: Thomas J. Robinson	
T - 00 -	
Address: 249 Bayshore Road	
B. OFFICERS	
President:	
Address:	
Address.	
Vice President:	
Address:	
Secretary:	
Address:	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an eddernum to the application listing addition	onal officers and/or directors.
13.	

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

14.



M JUL 25 PH 2: 55

SECRETARY OF STATE

Certificate of Compliance

Certificat de conformité

Canada Business Corporations Act s. 263.1

Loi canadienne sur les sociétés par actions art. 263.1

EZ Cat Inc.

Corporate name / Dénomination sociale

684791-9

Corporation number / Numéro de société

I HEREBY CERTIFY that the corporation named above:

- exists under the Canada Business Corporations Act;
- has filed the required annual returns; and
- · has paid all prescribed fees required.

JE CERTIFIE, par la présente, que la société cidessus mentionnée :

- existe en vertu de la Loi canadienne sur les sociétés par actions;
- a déposé les rapports annuels exigés; et
- a acquitté les droits prescrits.

Aïssa Aomari

Deputy Director / Directeur adjoint

2011-06-22

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