

F11000004752

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 NOV 22 PM 2:41

WH-57112
PS 11/29/11



- COPY -

FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 9, 2011

VICTORIA L NICOLS
995402 MONO ADJALA TOWNLINE
ROSEMONT,ONT.CANADA L0N 1R0,

SUBJECT: EQUESTRIAN FACTORY OUTLET INC.
Ref. Number: W11000057112

We have received your document for EQUESTRIAN FACTORY OUTLET INC. 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 document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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 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) 245-6901.

Pamela Smith
Regulatory Specialist II

Letter Number: 111A00025496

RECEIVED
TALLAHASSEE, FLORIDA

11 NOV 22 AM 8:45

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Equestrian Factory Outlet 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:

Victoria L. Nicols

Name of Person

Equestrian Factory Outlet Inc.

Firm/Company

995402 Mono Adjala Townline

Address

Rosemont, Ontario, Canada. L0N 1R0

City/State and Zip code

victoria@equestrianfactoryoutlet.com

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

For further information concerning this matter, please call:

Marc Nicols

Name of Person

at (705) 435-1313

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

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. Equestrian Factory Outlet Inc.

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

EFO Inc.

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

2. Ontario , Canada

(State or country under the law of which it is incorporated)

3. Ontario Corporation # 1733045

(FEI number, if applicable)

4. April 23 2007

(Date of incorporation)

5. Perpetual

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

6. January 2012

(Date first transacted business in Florida, if prior to registration)

(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 995402 Mono Adjala Townline , Rosemont , Ontario, L0N1R0

(Principal office address)

995402 Mono Adjala Townline , Rosemont , Ontario, L0N1R0

(Current mailing address)

8. Retailing of Equestrian Apparel / Tack

(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: Mr. Paul Delbrook

Office Address: 12345 NW 110th Ave.

Reddick, Florida 32686

(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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and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: N/A

Address: N/A

Vice Chairman: N/A

Address: N/A

Director: N/A

Address: N/A

Director: N/A

Address: N/A

B. OFFICERS

President: Victoria L. Nicols

Address: 995402 Mono Adjala Townline , Rosemont , Ontario, L0N1R0

Vice President: Donna M. Hancock

Address: 995402 Mono Adjala Townline , Rosemont , Ontario, L0N1R0

Secretary: N/A

Address: N/A

Treasurer: N/A

Address: N/A

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. Victoria L. Nicols

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

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Request ID: 013712026
Demande n°:
Transaction ID: 45975619
Transaction n°:
Category ID: CT
Catégorie :

Province of Ontario
Province de l'Ontario
Ministry of Government Services
Ministère des Services gouvernementaux

Date Report Produced: 2011/11/16
Document produit le :
Time Report Produced: 10:40:39
Imprimé à :

CERTIFICATE OF STATUS ATTESTATION DU STATUT JURIDIQUE

This is to certify that according to the
records of the Ministry of Government
Services

D'après les dossiers du Ministère des
Services gouvernementaux, nous attestons
que la société

EQUESTRIAN FACTORY OUTLET INC.

Ontario Corporation Number

Numéro matricule de la société (Ontario)

001733045

is a corporation incorporated,
amalgamated or continued under
the laws of the Province of Ontario.

est une société constituée, prorogée ou née
d'une fusion aux termes des lois de la
Province de l'Ontario.

The corporation came into existence on

La société a été fondée le

APRIL 23 AVRIL, 2007

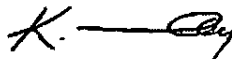
and has not been dissolved.

et n'est pas dissoute.

Dated

Fait le

NOVEMBER 16 NOVEMBRE, 2011



Director
Directrice

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DIVISION OF CORPORATIONS
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Ministry of
Consumer and
Ontario Business Services
CERTIFICATE
This is to certify that these articles
are effective on

Ministère des Services
aux consommateurs
et aux entreprises
CERTIFICAT
Ceci certifie que les présents statuts
ontrent en vigueur le

Ontario Corporation Number
Numéro de la société en Ontario

1733045

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DIVISION OF CORPORATIONS
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APRIL 23 AVRIL 2007

Director / Directrice

Business Corporations Act / Loi sur les sociétés par actions

**ARTICLES OF INCORPORATION
STATUTS CONSTITUTIFS**

Form 1
Business
Corporations
Act

Formule 1
Loi sur les
sociétés par
actions

1. The name of the corporation is: (Set out in BLOCK CAPITAL LETTERS)
Dénomination sociale de la société : (Écrire en LETTRES MAJUSCULES SEULEMENT)

E	Q	U	E	S	T	R	I	A	N	F	A	C	T	O	R	Y	O	U	T	L	E	T	I	N	C	.

2. The address of the registered office is:
Adresse du siège social :

995402 Mono-Adjala Town Line

(Street & Number or R.R. Number & if Multi-Office Building give Room No.)
(Rue et numéro ou numéro de la R.R. et, s'il s'agit d'un édifice à bureaux, numéro du bureau)

Rosemont

ONTARIO

L 0 N 1 R 0

(Name of Municipality or Post Office)
(Nom de la municipalité ou du bureau de poste)

(Postal Code)
(Code postal)

3. Number (or minimum and maximum number) of directors is/are:
Nombre (ou nombres minimal et maximal) d'administrateurs :

minimum/minimal

One(1)

maximum/maximal

Ten(10)

4. The first director(s) is/are:
Premier(s) administrateur(s) :

First name, middle names and surname
Prénom, autres Prénoms et nom de famille

Address for service, giving Street & No. or R.R. No.,
Municipality, Province, Country and Postal Code
Domicile élu, y compris la rue et le numéro, le numéro de la
R.R. ou le nom de la municipalité, la province, le pays et le
code postal

Resident Canadian?
Yes or No
Résident canadien?
Oui/Non

Victoria Lillian Nicols

**995402 Mono-Adjala Town Line,
Rosemont, Ontario L0N 1R0**

Yes

Donna Mary Hancock

**995402 Mono-Adjala Town Line,
Rosemont, Ontario L0N 1R0**

Yes