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(Req	uestor's Name)	
(Add	ress)	
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(City.	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Doc	ument Number)	
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SEGRETARY OF STATE



COVER LETTER

TO:	New Filing Section Division of Corporations					
CTIRI	ECT: Fairhomes Ho	melar	nd Inc.			
SOD			ation - must include suffix			
Dear S	ir or Madam:					
"Certif	closed "Application by Foreign C ficate of Existence," or "Certificat referenced foreign corporation to	e of Good	Standing" and check are subn			
Please	return all correspondence concern	ning this m	atter to the following:			
Fe	elix Gratopp					
-		Nam	e of Person			
Fa	irhomes Homeland	d Inc.				
		Firm/	Company		10 - 17 - 17 - 17	
13	9 Main Street, Uni	t 203				
		A	Address			
Ur	nionville, Ontario L3R 2	G6 Car	nada			
		City/Sta	ate and Zip code			
fe	lix.gratopp@sympatico.	ca	-			
			sed for future annual report no	otification)		
For fin	ther information concerning this	matter ple:	ase call:			
10114	mor morniation conserming with	mutor, pro	ago outr.		Eu 📰	
Feli	x Gratopp	at (90	5 , 415-9267	•	ALCINETATIVE SERVICE STREET	
	Name of Person		rea Code & Daytime Telepho	ne Number		- Alex
				*	SSS AHA	7
	STREET/COURIER ADDRESS New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	SS:	MAILING AD New Filing Sec Division of Cor P.O. Box 6327 Tallahassee, FL	tion porations	AN DE 12	
Enclos	ed is a check for the following an	ount:				
□ ^{\$7}	70.00 Filing Fee \$78.75 Filing Certificate	ng Fee & of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 I Certifica Certified	ite of Status &	

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.

			adopted for the purpose of transacting business		
Delawar	<u> </u>	_ 3.	(FEI number, if applicable)	· · · · · · · · · · · · · · · · · · ·	
(State or country	under the law of which it is incorporated)		(FEI number, if applicable)		
July 6, 2		_ 5.	Perpetual		
(Date	e of incorporation)		(Duration: Year corp. will cease to exist or "	perpetual"	")
	(Data Southern and Sharin		Florida, if prior to registration)		_
			02, F.S., to determine penalty liability)		
139 Maiı	n Street, Unit 203, Unionville	e, C	ntario L3R 2G6 Canada		
	(Principal office	addr	ess)		
139 Mair	n Street, Unit 203, Unionville				_
	(Current mailing	g addr	ess)		
Property	investments				
	s) of corporation authorized in home state	or co	untry to be carried out in state of Florida)	<u>₹</u> %	_ 😸
Name and stre	et address of Florida registered agent:	ው ሰ	Roy NOT accentable)		12 J
. Ivaine and sale	-		. Box inoracceptable)	AS	Ę
Name:	Jon P. Skelton, Pavese Law F	irm	<u> </u>	SEY Y	=
ffice Address:	1833 Hendry Street				
	Fort Myers		Florida 33901	93	Ġ.
	(City)	-	, Florida <u>33901</u> (Zip code)	3	42
Domintous d o					•
- ,	gent's acceptance: ned as registered agent and to accept s	ervic	e of process for the above stated corporat	ion at the	e place
esignated in this	application, I hereby accept the appo	intm	ent as registered agent and agree to act in	i this cap	acity. I
	omply with the provisions of all statut r with and accept the obligations of my		lative to the proper and complete perform ition as registered agent.	ance of i	my dutte
		, , ,			
	Λ				
	11 . (10. 14.	·~			
	(Registered agent's signat				

under the law of which it is incorporated.

12. Names and bu	siness addresses of officers and/or directors:			
A. DIRECTORS				
Chairman:	· · · · · · · · · · · · · · · · · · ·			
Address:				_
Vice Chairman:				_
Address:				
Director: Feli	ix Gratopp			
Address: 139	Main Street, Unit 203			_
Unic	onville, Ontario L3R 2G6 Canada			
Director:				
Address:				_
B. OFFICERS			•	
President:			.	_
Address:		1		_
Vice President:		HET.	É	
	· •	⊃v! €	-	
			<u> </u>	
Secretary:		+ ,	F	What ye
Address:	· • • • • • • • • • • • • • • • • • • •	· · · ·	V	_
Freasurer:				 .
Address:	- A			
	ry, you may attach an addendum to the application listing additional officers and/or direct	ors.		
13	Signature of Director or Officer			_
are true and that he	tor signing this document (and who is listed in number 12 above) affirms that the facts state or she is aware that false information submitted in a document to the Department of State as provided for in s.817.155, F.S.	ited he	erein titutes a	a
14. Felix	Gratopp, Director			

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

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "FAIRHOMES HOMELAND INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TENTH DAY OF JULY, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

SACINETARY OF STATE TALLAMASSEE, PLERIDA

5180369 8300

120818877

AUTHENT CATION: 9697417

DATE: 07-10-12

You may verify this certificate online at corp.delaware.gov/authver.shtml