F 1300003874		
(Requestor's Name) (Address) (Address)	200251261352	
(City/State/Zip/Phone #)	09/06/1301024001 **70.00	
(Business Entity Name) (Document Number)		

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9/11/13 éc

13 SEP -6 PM 1: 48

REORATIONS

### COVER LETTER

TO: New Filing Section Division of Corporations

## **SUBJECT:** Montetres Solutions Corporation

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:

## Narindra Jeethan

Name of Person

## **Montetres Solutions Corporation**

Firm/Company

10640 NW 39 CT

Address

## Coral Springs, FL, 33065

City/State and Zip code

### njeethan@montetressolutions.com

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

For further information concerning this matter, please call:

#### at (818 ) 292-7054 Narindra Jeethan Name of Person Area Code & Daytime Telephone Number STREET/COURIER ADDRESS: **MAILING ADDRESS: New Filing Section** New Filing Section **Division of Corporations Division of Corporations** •• **Clifton Building** P.O. Box 6327 **6** 2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301 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 1.1

### 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.

#### Montetres Solutions Corporation 1

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

Canada	3		
	under the law of which it is incorporated)	(FEI number, if applicable)	
April 22,	2013 5	Perpetual	
( ····	of incorporation)	(Duration: Year corp. will cease to exist or "perpe	etual")
<u>N/A</u>			
		in Florida, if prior to registration) 1502, F.S., to determine penalty liability)	
1586 Mar	shcourt Dr, Pickering, Ol	N, L1V 6G4, Canada	
· · · · · · · · · · · · · · · · · · ·	(Principal office ad	· ·	
1586 Mar	shcourt Dr, Pickering, ON,	L1V 6G4, Canada	
	(Current mailing ad	dress)	
To Provi	de consultants and Softw	vare services to businesses.	ជ
(Purpose(s	s) of corporation authorized in home state or c	country to be carried out in state of Florida)	SEP
Name and stree	et address of Florida registered agent: (P	.O. Box <u>NOT</u> acceptable)	9-
Name:	Narindra Jeethan		РН
ffice Address:	10640 NW 39 CT		
	Coral Springs	, Florida 33065	8

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.

-the perto (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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|                                                                                                                                                                                                             | <i></i>                                                 |  |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|--|--|
| 12. Names and business addresses of officers and/or directors:                                                                                                                                              | FILED<br>SECRETARY OF STATE<br>DIVISION OF CORPORATIONS |  |  |
| A. DIRECTORS                                                                                                                                                                                                |                                                         |  |  |
| Chairman: Narindra Jeethan                                                                                                                                                                                  | 13 SEP -6 PM 1:48                                       |  |  |
| Address: 1586 Marshcourt Dr, Pickering, ON, L1V 6G4, Canada                                                                                                                                                 |                                                         |  |  |
|                                                                                                                                                                                                             | · · · · ·                                               |  |  |
| Vice Chairman:                                                                                                                                                                                              | ······································                  |  |  |
| Address:                                                                                                                                                                                                    |                                                         |  |  |
|                                                                                                                                                                                                             |                                                         |  |  |
| Director:                                                                                                                                                                                                   |                                                         |  |  |
| Address:                                                                                                                                                                                                    | ····                                                    |  |  |
|                                                                                                                                                                                                             |                                                         |  |  |
| Director:                                                                                                                                                                                                   |                                                         |  |  |
| Address:                                                                                                                                                                                                    |                                                         |  |  |
|                                                                                                                                                                                                             |                                                         |  |  |
| B. OFFICERS                                                                                                                                                                                                 |                                                         |  |  |
| President:                                                                                                                                                                                                  |                                                         |  |  |
| Address:                                                                                                                                                                                                    |                                                         |  |  |
|                                                                                                                                                                                                             |                                                         |  |  |
| Vice President:                                                                                                                                                                                             |                                                         |  |  |
| Address:                                                                                                                                                                                                    |                                                         |  |  |
|                                                                                                                                                                                                             |                                                         |  |  |
| Secretary:                                                                                                                                                                                                  |                                                         |  |  |
| Address:                                                                                                                                                                                                    |                                                         |  |  |
| reasurer:                                                                                                                                                                                                   |                                                         |  |  |
| Address:                                                                                                                                                                                                    |                                                         |  |  |
| NOTE: If necessary, you may attach an addendum to the application listing add                                                                                                                               | ditional officers and/or directors.                     |  |  |
| 13. Madaheeting                                                                                                                                                                                             |                                                         |  |  |
| Signature of Director or Officer<br>The officer or director signing this document (and who is listed in number 12 ab<br>are true and that he or she is aware that false information submitted in a document | pove) 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 co a third degree felony as provided for in s.817.155, F.S.

14. Narindra Jeethan

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

# Industry

Ψ

Industry Industrie Canada Canada

# **Certificate of Existence Certificat d'existence** Canada Business Corporations Act Loi canadienne sur les sociétés par actions s. 263.1(1)(c) art. 263.1(1) MONTETRES SOLUTIONS CORPORATION Corporate name / Dénomination sociale 850024-0 Corporation number / Numéro de société I HEREBY CERTIFY that the corporation JE CERTIFIE, par la présente, que la société named above was in existence under the ci-dessus mentionnée existait en vertu de la Canada Business Corporations Act on 2013-Loi canadienne sur les sociétés par actions 09-02 (YYYY-MM-DD). le 2013-09-02 (AAAA-MM-JJ). Ware Maint Marcie Girouard ω. SEP Director / Directeur 2013-09-02 5 Issuance date (YYYY-MM-DD) Date d'émission (AAAA-MM-JJ) 84 : 1 Hd



#### Gmail - Cert - Existence

• • • .



### Cert - Existence

#### corporationscanada@ic.gc.ca < corporationscanada@ic.gc.ca>

To: njeethan@gmail.com

183 Industry Canada I



Dear Narindra Jeethan, Madame, Monsieur, The Certificate of Existence for MONTETRES Vous trouverez ci-joint le Certificat d'existence SOLUTIONS CORPORATION is attached. demandé pour MONTETRES SOLUTIONS CORPORATION If you have any questions, please do not hesitate to contact Corporations Canada with reference to Si vous avez des questions concernant cet avis, n'hésitez pas à communiquer avec Corporations Request ID 6192903. Canada en indiquant le numéro d'identification de Thank you for using Corporations Canada Online la demande 6192903. Filing Centre. Nous vous remercions d'avoir utilisé le Centre de 'To access the Portable Document Format (PDF) file, you must dépôt en ligne de Corporations Canada. have a PDF reader installed. If you do not already have such a reader, Adobe Reader is available for free download on the Internet. \*Pour accéder au fichier Portable Document Format (PDF), vous devez disposer d'un lecteur PDF. Si tel n'est pas le cas, Adobe Reader peut être téléchargé gratuitement à partir d'Internet. **Contact Information** Coordonnées Courriel : corporationscanada@ic.gc.ca Email: corporationscanada@ic.gc.ca Telephone: 1-866-333-5556 Téléphone: 1-866-333-5556 Monday - Friday, 7:30 AM - 8:00 PM EST du lundi au vendredi, de 7h30 à 20h HNE

Existence.pdf 25K SECRETARY OF STATE JIVISICY OF CORPORATIONS

Combol

AM

Mon, Sep 2, 2013 at 8:23

Narindra Jeethan < njeethan@gmail.com>