FIBMOHOSZ

| (Requestor's Name) | _ |
|--|----------|
| (Address) | |
| (Address) | _ |
| (City/State/Zip/Phone #) | |
| PICK-UP WAIT MAIL | |
| (Business Entity Name) | _ |
| (Document Number) | _ |
| Certified Copies Certificates of Status | <u> </u> |
| Special Instructions to Filing Officer: | ٦ |
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Office Use Only



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DEPARTMENT OF STATE

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13 SEP 20 AM 8: 26 SECRETARY OF STATE

Ps 9/23/13



| ION SERVICE COMPANY | | | |
|---|------------|----------------|-------|
| ACCOUNT NO. | : | I2000000195 | |
| REFERENCE | : | 815884 | 6699A |
| AUTHORIZATION | : | | |
| COST LIMIT | : | \$ PPD | |
| ORDER DATE : September 20, 201 | 13 | | |
| ORDER TIME : 12:46 PM | | | |
| ORDER NO. : 815884-005 | | | |
| CUSTOMER NO: 6699A | | | |
| | | | · |
| FOREIGN FI | [LI | <u>ngs</u> | |
| NAME: TREMBLAY U.S.A | A., | INC. | |
| XXXX QUALIFICATION (TYPE: CO | <u>)</u>) | | |
| PLEASE RETURN THE FOLLOWING AS | PRO | OOF OF FILING: | |
| XX CERTIFIED COPY PLAIN STAMPED COPY XX CERTIFICATE OF GOOD STA | WDI | ING | |
| CONTACT PERSON: Susie Knight - | - F | EXT# 52956 | |
| | ъ | YAMTNEP · | |

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.

| | · | ne adopted for the purpose of transacting busine | ess in Florida) | | |
|--|--|--|--------------------|--|-------|
| Delaware, U.S.A. | | 3. Applied for | | | |
| | | (FEI number, if applicable) 5. Perpetual | | | |
| | | | | | (Date |
| O29 Trans | (SEE SECTIONS 607.1501 & 607 | s in Florida, if prior to registration) .1502, F.S., to determine penalty liability) | | | |
| 938 Tropic | (Principal office ac | ddrecc) | 글 <u>의</u> (3 | | |
| Delray Bea | ach, FL 33483 | udi casj | SE | | |
| | (Current mailing ac | ddress) | P 20 | | |
| Franchise | es | | P20 M HARY OF | | |
| |) of corporation authorized in home state or | country to be carried out in state of Florida) | 8: 2 8: 2 | | |
| Name and stree | t address of Florida registered agent: (I | P.O. Box NOT acceptable) | 意形め | | |
| Name: | Larry J. Behar | | | | |
| ffice Address: | 888 S.E. 3rd Avenue, # | 400 | | | |
| | Fort Lauderdale | . Florida 33316 | | | |
| | (City) | (Zip code) | | | |
| aving been namesignated in this arther agree to co | application, I hereby accept the appoir | rvice of process for the above stated corportents on the stated corportent and agree to a state relative to the proper and complete perform state of my position as registered agent. | ct in this capacit | | |

^{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.

| A DIDE | Chops |
|---------------------------|---|
| A. DIRE | Jean Trembiay |
| | 938 Tropic Blvd. |
| | Delray Beach, FL 33483 |
| - | |
| Vice Chair | nan: |
| Address: _ | · · · · · · · · · · · · · · · · · · · |
| _ | |
| Director: _ | |
| Address: _ | |
| _ | |
| Director: | |
| | |
| | |
| B. OFFI | TDC |
| | Jean Tremblay |
| | 138 Tropic Blvd |
| | Delray Reach El 33483 ≝□ 및 ਜ |
| _ | |
| Vice Presid | ent: |
| Address: _ | <u> </u> |
| _ | र्क |
| Secretary: | |
| Address: _ | |
| Treasurer: | |
| Address: _ | |
| | necessary, you may attach an addendum to the application listing additional officers and/or directors. |
| | teersary, you may attach an addendam to the application fisting additional officers and/or directors. |
| | Signature of Director or Officer |
| The office are true an | or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein that he or she is aware that false information submitted in a document to the Department of State constitutes |
| a third deg | ree felony as provided for in s.817.155, F.S. |
| 14 | JEAN TREMBLAY (Typed or printed name and capacity of person signing application) |

1 7

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "TREMBLAY U.S.A., 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 TWENTIETH DAY OF

SEPTEMBER, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TREMBLAY U.S.A., INC." WAS INCORPORATED ON THE NINETEENTH DAY OF JULY, A.D. 2013.

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

13 SEP 20 AM 8: 26 SECRETARY OF STATE

5370674 8300

131110615

Jeffrey W Bullock, Secretary of S

AUTHENTY CATION: 0752317

DATE: 09-20-13

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