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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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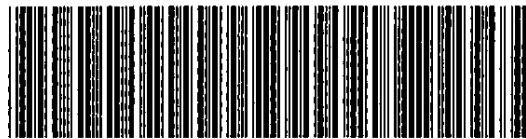
(Business Entity Name)

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COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: BizMax Pro 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:

Richard R. Provost, president.
Name of Person

Fratlicelli Provost, LLC.
Firm/Company

1155 RENE LEVESQUE west, suite 2800.
Address

MONTRÉAL, QUÉBEC, CANADA, H3B 2L2
City/State and Zip code

Rprovost@FPLEK.CA
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Richard R Provost at (514) 866-6604.
Name of Person 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. BIZMAX PRO INC

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"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)

2. CANADA

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

3. N/A

(FEI number, if applicable)

4. JUNE 12, 2002

(Date of incorporation)

5. Perpetual

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

6. _____

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 616 MONTEE ST-ELMIRE, SAINT-SAUVEUR, QC, CANADA, J0R 1R1

(Principal office address)

1155 RENE LEVESQUE WEST, SUITE 2800, MONTREAL, QC, CANADA H3B 2L2

(Current mailing address)

8. Real Estate Holding, Management, Rental and Development.

(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: Patricia Provost

Office Address: 7436 RIVIERA COVE

Bradenton

(City)

Florida 34202

(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.

Patricia M. Verhoeven-Provost

(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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12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Richard R. Provost.

Address: 616 MONTEE ST-ELMINE, SAINT-SAUVEUR, QC,
CANADA. J0R 1V21

Vice Chairman: SAME AS ABOVE

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Richard R. Provost.

Address: 616 MONTEE ST-ELMINE, SAINT-SAUVEUR, QC. CANADA
J0R 1V21

Vice President: SAME AS ABOVE

Address: _____

Secretary: SAME AS ABOVE

Address: _____

Treasurer: SAME AS ABOVE

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. RRP

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. RICHARD R. PROVOST, President

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

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Québec

Certificate of attestation

Act respecting the legal publicity of enterprises

I attest that

BIZMAXPRO INC.

- is registered since June 27, 2002.
- is not in default of filing an annual declaration.
- is not in default of conforming to a request made in virtue of article 73.
- is not in the process of being dissolved.
- is not deleted from the company registry.

Certification number: 689562135

The certification number above allows you to consult this certified document at all times using our on-line services at « Verify a certification number » of the Company Registry.

Filed upon the registry on January 7, 2014 under
the company number of Québec 1160889979.

Registrar of companies

Québec

(s) Hermel Grandmaison

Registrar of companies