

F14000004422

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : NORTHWEST REGISTERED AGENT LLC
Account Number : I20090000081
Phone : (509)768-2249
Fax Number : (855)330-1010

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

FOREIGN PROFIT/NONPROFIT CORPORATION

NeoGraft Solutions Inc

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
| Certified Copy | 0 |
| Page Count | 04 |
| Estimated Charge | \$70.00 |

FILED
14 OCT 17 AM 7:50
TALLAHASSEE, FLORIDA

RECEIVED
14 OCT 17 AM 11:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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. **NeoGraft Solutions 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. **04/08/2008**

(Date of incorporation)

5. **Perpetual**

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

6. **Upon Qualification**

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

7. **23 Lesmill Rd. Ste 205, Toronto, ON M3B3P6**

(Principal office address)

(Current mailing address)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: **Northwest Registered Agent LLC**

Office Address: **3030 N. Rocky Point Dr, STE 150A**

Tampa

(City)

, Florida **33607**

(Zip code)

9. 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.



Dan Keen, Manager

(Registered agent's signature)

10. 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.

14 OCT 17 AM 7:00
SECRETARIAT
OF THE
TREASURY
DEPARTMENT
WASHINGTON, DC 20548

11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Miriam Merkur

Address: 23 Lesmill Rd. Ste 205, Toronto, ON M3B3P6

Director: _____

Address: _____

B. OFFICERS

President: Miriam Merkur

Address: 23 Lesmill Rd. Ste 205, Toronto, ON M3B3P6

Vice President: _____

Address: _____

Secretary: Miriam Merkur

Address: 23 Lesmill Rd. Ste 205, Toronto, ON M3B3P6

Treasurer: Miriam Merkur

Address: 23 Lesmill Rd. Ste 205, Toronto, ON M3B3P6

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

12. Miriam Merkur
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.

13. Miriam Merkur, President
(Typed or printed name and capacity of person signing application)

Request ID: 016924993
Demande n° :
Transaction ID: 55650936
Transaction n° :
Category ID: CT
Catégorie :

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

Date Report Produced: 2014/10/09
Document produit le :
Time Report Produced: 11:06:03
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

NEOGRAFT SOLUTIONS INC.

Ontario Corporation Number

Numéro matricule de la société (Ontario)

002169016

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 08 AVRIL, 2008

and has not been dissolved.

et n'est pas dissoute.

Dated

Fait le

OCTOBER 09 OCTOBRE, 2014



Director
Directeur

The issuance of this certificate in electronic form is authorized by the Ministry of Government Services.

La délivrance du présent certificat sous forme électronique est autorisée par le Ministère des Services gouvernementaux.

14 OCT 17 AM 7:50
SECRETARY OF STATE
PAUL AMASSOULET