

10/29/2014 10:54 FAX

LEOPOLD KORN LEOPOLD, P.A.

2014/004

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Florida Department of State  
Division of Corporations  
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To:

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

From:

Account Name : LEOPOLD KORN & LEOPOLD, P.A.  
Account Number : I20010000025  
Phone : (786) 899-2235  
Fax Number : (786) 899-2318

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

**Email Address:** steven.levy@gtax.com

**FOREIGN PROFIT/NONPROFIT CORPORATION**  
**9044361 CANADA INC.**

Certificate of Status	1
Certified Copy	1
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*gf* 10/31/14

**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. 9044361 CANADA 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. Quebec, Canada**

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

**3.**

(FEI number, if applicable)

**4. October 7, 2014**

(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. 5005 rue Jean-Talon Blvd., #210, Montréal QC H4P 1W7 CANADA**

(Principal office address)

**14565 NW 26th Avenue, Opa Locka, FL 33054**

(Current mailing address)

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

Name:

**Leopold Korn, P.A.**

Office Address:

**20801 Biscayne Blvd., #501****Aventura**

(City)

, Florida

**33180**

(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.*

(Registered agent's signature)

**Karen S. Leopold, President**

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.

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

**A. DIRECTORS**

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_**B. OFFICERS**President: Ami PelegAddress: 194 WEXFORD CRESCENT  
HAMPSTEAD, QC H3X 1E2,CANADA

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Secretary: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Treasurer: \_\_\_\_\_

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

12. \_\_\_\_\_

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. Ami Peleg, President

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



Industry Industrie  
Canada Canada

## Certificate of Incorporation

*Canada Business Corporations Act*

## Certificat de constitution

*Loi canadienne sur les sociétés par actions*

9044361 CANADA INC.

Corporate name / Dénomination sociale

904436-1

Corporation number / Numéro de société

I HEREBY CERTIFY that the above-named corporation, the articles of incorporation of which are attached, is incorporated under the *Canada Business Corporations Act*.

JE CERTIFIE que la société susmentionnée, dont les statuts constitutifs sont joints, est constituée en vertu de la *Loi canadienne sur les sociétés par actions*.

Virginie Ethier

Director / Directeur

2014-10-07

Date of Incorporation (YYYY-MM-DD)  
Date de constitution (AAAA-MM-JJ)

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