

F4000004838

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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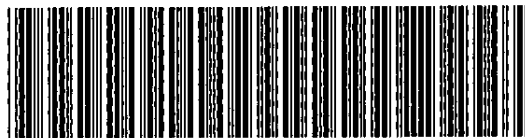
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

MD 11/17

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: 8949344 CANADA 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:

Antoine Brosseau Wery

Name of Person

Altro Levy

Firm/Company

630 Sherbrooke West, Suite 1200

Address

Montreal, QC, H3A 1E4, Canada

City/State and Zip code

awery@altrolevy.com

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

For further information concerning this matter, please call:

Antoine Brosseau Wery at (514) 940-8000

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.

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1. **8949344 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. **CANADA**

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

3. **N/A**

(FEI number, if applicable)

4. **July 10, 2014**

(Date of incorporation)

5. **perpetual**

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

6. **N/A**

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

7. **4 rue Lancelot, Kirkland, QC, H9J 3W7, Canada**

(Principal office address)

4 rue Lancelot, Kirkland, QC, H9J 3W7, Canada

(Current mailing address)

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

Name: **Jeffrey Feinberg**

Certified Title, Feinberg & Maidenbaum, 4051 Sheridan Street, Suite 200

Office Address:

Hollywood

(City)

, Florida **33021**

(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)

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.

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: **Gabriel Lazzarini**

Address: **4 rue Lancelot, Kirkland, QC, H9J 3W7, Canada**

Director: **Anna Maria Lazzarini**

Address: **4 rue Lancelot, Kirkland, QC, H9J 3W7, Canada**

B. OFFICERS

President: **Gabriel Lazzarini**

Address: **4 rue Lancelot, Kirkland, QC, H9J 3W7, Canada**

Vice President: **Anna Maria Lazzarini**

Address: **4 rue Lancelot, Kirkland, QC, H9J 3W7, Canada**

Secretary: **Anna Maria Lazzarini**

Address: **4 rue Lancelot, Kirkland, QC, H9J 3W7, Canada**

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. **Gabriel Lazzarini, as President**

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

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TALLAHASSEE, FLORIDA



Industry
Canada

Industrie
Canada

Certificate of Compliance

Canada Business Corporations Act
s. 263.1

Certificat de conformité

Loi canadienne sur les sociétés par actions
art. 263.1

8949344 CANADA INC.

Corporate name / Dénomination sociale

894934-4

Corporation number / Numéro de société

I HEREBY CERTIFY that the corporation
named above:

- exists under the *Canada Business Corporations Act*;
- has filed the required annual returns; and
- has paid all prescribed fees required.

JE CERTIFIE, par la présente, que la société ci-
dessus mentionnée :

- existe en vertu de la *Loi canadienne sur les sociétés par actions*;
- a déposé les rapports annuels exigés; et
- a acquitté les droits prescrits.

Virginie Ethier

Director / Directeur

2014-11-03

Issuance date (YYYY-MM-DD)
Date d'émission (AAAA-MM-JJ)

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FALL AHASSSE, FLORIAN

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