

Florida Department of State

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FOREIGN PROFIT/NONPROFIT CORPORATION MAGNOLIA PARK JACKSONVILLE ENTERPRISES INC

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Electronic Filing Menu

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or 1/21/15

under the law of which it is incorporated.

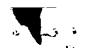
APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLILOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

MAGNOLIA PARK JACKSONVILLE ENTERPRISES INC.

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

CANADA (State or country under the law of which it is incorporated) 01-15-15		(FEI number, if applicable) PERPETUAL	
	of incorporation) 5.	(Duration: Year corp. will cease to exist or "perpetual"	<u>")</u>
		n Florida, if prior to registration) 502, F.S., to determine penalty liability)	_
4444 STE CATH	HERINE STREET WEST SUITE 100 WES		
· · · · · · · · · · · · · · · · · · ·	(Principal office add		_
4444 STE CAT	HERINE STREET WEST SUITE 100 WES	BMOUNT QUEBEC CANADA H3Z 1R2	<u>ج</u>
•	(Current mailing add	ress)	ਨੂੰ, ਨੂੰ,
Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)		JAN 2	
Name:	MARJORIE MARGOLIES, ESQ.		
ffice Address:	140 N FEDERAL HIGHWAY SUITE 20	0	T 32 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
	BOCA RATON	Florida 33432 (Zip code)	101F
	(City)	(Zip code)	~
aving been nam tsignated in this orther agree to c	application, I hereby accept the appoint	rice of process for the above stated corporation at t ment as registered agent and agree to act in this co relative to the proper and complete performance o of my position as registered agent.	apacity.
	Maulh		



FILED

15 JAN 20 PM 1: 07

	10 0m 20 th 1.
11. Names and business addresses of officers and/or directors:	SECRETARY OF STAT
A. DIRECTORS	TALL MIASSEE, FLORI
Chairman: MURRAY DALFEN	
Address: 4444 STE CATHERINE STREET WEST SU	ITE 100
WESTMOUNT QUEBEC CANADA H3Z 1R2	
Vice Chairman:	
Address:	
Director:	
Address:	
Aud. 35.	· · · · · · · · · · · · · · · · · · ·
Director:	
Address:	
	-
B. OFFICERS	
President:	
Address:	· · · · · · · · · · · · · · · · · · ·
Vice President:	
Address:	
Secretary:	
Address:	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional control of the second	officers and/or directors.
12. Justile.	
Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) affi	irms 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.	
(Typed or printed name and capacity of person signing application)	on)
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Industry Canada

Industrie Canada

Certificate of Existence

Certificat d'existence

Canada Business Corporations Act s. 263.1(1)(c) Loi canadienne sur les sociétés par actions art. 263.1(1)

MAGNOLIA PARK JACKSONVILLE ENTERPRISES INC.

Corporate name / Dénomination sociale

915399-3

Corporation number / Numéro de société

I HEREBY CERTIFY that the corporation named above was in existence under the Canada Business Corporations Act on 2015-01-16 (YYYY-MM-DD).

JE CERTIFIE, par la présente, que la société ci-dessus mentionnée existait en vertu de la Loi canadienne sur les sociétés par actions le 2015-01-16 (AAAA-MM-JJ).

Jungana Ethian

Virginie Ethler

Director / Directeur

2015-01-16

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

ELLARY OF STATE

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Canadä