

Jan 20, 2015 3:27 PM
Division of Corporations

No. 0712 P. 1
Page 1 of 1

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Refaxed
1/26/15

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

From:
Account Name : SAXON, GILMORE, CARRAWAY, GIBBONS, LASH & WILCOX, P.A.
Account Number : I20030000134
Phone : (813) 314-4500
Fax Number : (813) 314-4555

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

Email Address: bsaxon@saxongilmore.com

Our client #024824.02000

**FOREIGN PROFIT/NONPROFIT CORPORATION
VARCAN CONTRACTING INC.**

Certificate of Status	1
Certified Copy	1
Page Count	11
Estimated Charge	\$87.50

12

Electronic Filing Menu

Corporate Filing Menu

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15 JAN 26 PM 4:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Jan. 26. 2015 3:27PM

No. 0712 P. 2

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COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: VARCAN CONTRACTING 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:

Bernice S. Saxon, Esq.

Name of Person

Saxon, Gilmore, Carraway & Gibbons, P.A.

Firm/Company

201 E. Kennedy Blvd., Suite 600

Address

Tampa, FL 33602

City/State and Zip code

bsaxon@saxongilmore.com

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

For further information concerning this matter, please call:

Bernice S. Saxon

at (813) 314-4501

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

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H1500001855134003

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. VARGAN CONTRACTING 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. Ontario, Canada

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

3.

(PEI number, if applicable)

4. January 5, 2015

(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. 55 Victoria Street North, Suite J, Kitchener, Ontario, Canada N2H 5B7

(Principal office address)

55 Victoria Street North, Suite J, Kitchener, Ontario, Canada N2H 5B7

(Current mailing address)

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

Name: Bernice S. Saxon, Esq.

Office Address: 201 E. Kennedy Blvd, #600

Tampa

(City)

, Florida

33602

(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)

Bernice S. Saxon, Esq., Registered Agent

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: Harsch Vardhan Khandelwal

Address: 55 Victoria Street North, Suite J, Kitchener, Ontario, Canada N2H 5B7

Vice Chairman: Anita Michele Khandelwal

Address: 55 Victoria Street North, Suite J, Kitchener, Ontario, Canada N2H 5B7

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Harsch Vardhan Khandelwal

Address: 55 Victoria Street North, Suite J, Kitchener, Ontario, Canada N2H 5B7

Vice President: _____

Address: _____

Secretary: Anita Michele Khandelwal

Address: 55 Victoria Street North, Suite J, Kitchener, Ontario, Canada N2H 5B7

Treasurer: Anita Michele Khandelwal

Address: 55 Victoria Street North, Suite J, Kitchener, Ontario, Canada N2H 5B7

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. Harsch Vardhan Khandelwal, President

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

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Jan. 26. 2015 3:28PM

No. 0712 P. 5

((H15000018851 3)))



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Request ID: 017188972
Demande n°:
Transaction ID: 058373783
Transaction n°:
Category ID: CT
Catégorie:

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

Date Report Produced: 2015/01/05
Document produit le:
Time Report Produced: 09:30:45
Imprimé à:

Certificate of Incorporation Certificat de constitution

This is to certify that

Ceci certifie que

VARCAN CONTRACTING INC.

Ontario Corporation No.

Numéro matricule de la personne morale en
Ontario

002448469

is a corporation incorporated,
under the laws of the Province of Ontario.

est une société constituée aux termes
des lois de la province de l'Ontario.

These articles of Incorporation
are effective on

Les présents statuts constitutifs
entrent en vigueur le

JANUARY 05 JANVIER, 2015

Director/Directeur
Business Corporations Act/Loi sur les sociétés par actions

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H15000018851 3ABCS

((H15000018851 3))



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Page: 1

Request ID / Demande n°
17186972

Ontario Corporation Number
Numéro de la compagnie en Ontario
2448469

FORM 1

FORMULE NUMÉRO 1

BUSINESS CORPORATIONS ACT

LOI SUR LES SOCIÉTÉS PAR ACTIONS

ARTICLES OF INCORPORATION
STATUTS CONSTITUTIFS

1. The name of the corporation is: Dénomination sociale de la compagnie:
VARGAN CONTRACTING INC.

2. The address of the registered office is: Adresse du siège social:

35 VICTORIA STREET NORTH

(Street & Number, or R.R. Number & if Multi-Office Building give Room No.)
(Rue et numéro, ou numéro de la R.R. et, s'il s'agit d'un bâtiment à bureau, numéro du bureau)

KITCHENER

CANADA

(Name of Municipality or Post Office)
(Nom de la municipalité ou du bureau de poste)

Suite J

ONTARIO

N2H 5B7

(Postal Code/Code postal)

3. Number (or minimum and maximum number) of directors is: Nombre (ou nombres minimal et maximal) d'administrateurs:

Minimum 1

Maximum 10

4. The first director(s) is/are: Premier(s) administrateur(s):

First name, initials and surname
Prénom, initiales et nom de famille

Address for service, giving Street & No.
or R.R. No., Municipality and Postal Code

Resident Canadian State Yes or No
Résident Canadien Oui/Non

Domicile élu, y compris la rue et le
numéro, le numéro de la R.R., ou le nom
de la municipalité et le code postal

5. HARSCH YES
 KHANDRIWAL
 35 VICTORIA STREET NORTH Suite J
 KITCHENER ONTARIO
 CANADA N2H 5B7

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Jan. 26. 2015 3:28PM

No. 0712 P. 7

((CH15000018851 3)))



H150000188513A003

Page: 2

Request ID / Demande n°
17186972

Ontario Corporation Number
Numéro de la compagnie en Ontario
2448469

4. The first director(s) is/are:

Premier(s) administrateur(s):

First name, initials and surname
Prénom, initiales et nom de famille

Resident Canadian State Yes or No
Résident Canadien Oui/Non

Address for service, giving Street & No.
or R.R. No., Municipality and Postal Code

Domicile also, y compris le rue et le
numéro, le numéro de la R.R., ou le nom
de la municipalité et le code postal

* ANITA

YES

KHANDELWAL

55 VICTORIA STREET NORTH Suite J

KITCHENER ONTARIO

CANADA N2H 5B7

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Jan. 26. 2015 3:29PM

No. 0712 P. 8

((H1500018851 3)))



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Page: 3

Request ID / Demande n°
17186972

Ontario Corporation Number
Numéro de la compagnie en Ontario
2448469

-
5. Restrictions, if any, on business the corporation may carry on or on powers the corporation may exercise.
Limites, s'il y a lieu, imposées aux activités commerciales ou aux pouvoirs de la compagnie.
- No restrictions.

6. The classes and any maximum number of shares that the corporation is authorized to issue:
Catégories et nombre maximal, s'il y a lieu, d'actions que la compagnie est autorisée à émettre:
- An unlimited number of Common Shares

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Page: 4

Request ID / Demande n°
17106972

Ontario Corporation Number
Numéro de la compagnie en Ontario
2448469

7. Rights, privileges, restrictions and conditions (if any) attaching to each class of shares and directors authority with respect to any class of shares which may be issued in series:
Droits, privilèges, restrictions et conditions, s'il y a lieu, rattachés à chaque catégorie d'actions et pouvoirs des administrateurs relatifs à chaque catégorie d'actions que peut être mise en série:

COMMON SHARES

The holders of the Common Shares shall be entitled:

- a) to one vote for each Common Share held at all meetings of shareholders, except meetings at which only shareholders of a specified class of shares are entitled to vote; and
- b) to receive the remaining property of the Corporation upon a dissolution;
- c) to receive dividends in the discretion of the Board of Directors.

((H15000018851 3)))



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Jan. 26. 2015 3:29PM

No. 0712 P. 10

((H15000018351 3)))



H150000183513-BC3

Page: 5

Request ID / Demande n°
17186972

Ontario Corporation Number
Numéro de la compagnie en Ontario
2448469

8. The issue, transfer or ownership of shares is/is not restricted and the restrictions (if any) are as follows:
L'émission, le transfert ou la propriété d'actions est/n'est pas restreinte. Les restrictions, s'il y a lieu, sont les suivantes:

No shareholder of the Corporation shall be entitled to transfer any share or shares of the Corporation without either:

a) the previous sanction of the holders of more than fifty percent of the common shares of the Corporation for the time being outstanding expressed by an instrument or instruments in writing signed by the holders of more than fifty percent of the common shares of the Corporation for the time being outstanding; or

b) the previous sanction of the Directors of the Corporation expressed by a resolution passed by the votes of a majority of the Directors of the Corporation at a meeting of the Board of Directors or by an instrument or instruments in writing signed by a majority of the Directors.

((H15000018851 3)))



H150000188513-BC3

((H15000018551 3)))



H150000185513A8C3

Page: 6

Request ID / Demande n°
17186972

Ontario Corporation Number
Numéro de la compagnie en Ontario
2448469

D. Other provisions, (if any, are):
Autres dispositions, s'il y a lieu:

A. The number of shareholders of the Corporation exclusive of persons who are in the employment of the Corporation and exclusive of persons who, having been formerly in the employment of the Corporation, were, while in the employment and have continued, after the termination of that employment, to be shareholders of the Corporation, is limited to not more than fifty, two or more owners of one or more shares being counted as one shareholder; and

B. Any invitation to the public to subscribe for securities of the Corporation is prohibited;

C. The Corporation may purchase any of its issued shares;

D. When authorized by a special by-law the Directors may:

i) borrow money on the credit of the Corporation;

ii) issue, sell or pledge debt obligations of the Corporation;

iii) charge, mortgage, hypothecate or pledge all or currently owned or subsequently acquired real or personal, movable or immovable, property of the Corporation, including book debts, rights, powers, franchises and undertaking, to secure any debt obligations or money borrowed, or other debt or liability of the Corporation.

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Jan. 26. 2015 3:30PM

No. 0712 P. 12

((H15000018851 3)))



H150000188513A8C3

Page: 7

Request ID / Demande n°
17186972

Ontario Corporation Number
Numéro de la compagnie en Ontario
2448469

10. The names and addresses of the incorporators are
Nom et adresse des fondateurs

First name, initials and last name
or corporate name

Prénom, initiale et nom de
famille ou dénomination sociale

Full address for service or address of registered office or of principal place of business
giving street & No. or R.R. No., municipality and postal code
Domicile élu, adresse du siège social ou adresse de l'établissement principal, y compris
la rue et le numéro, le numéro de la R.R., le nom de la municipalité et le code postal

* HARSCH KHANDLWAL
55 VICTORIA STREET NORTH Suite J

KITCHENER ONTARIO
CANADA N2H 5B7

* ANITA KHANDLWAL
55 VICTORIA STREET NORTH Suite J

KITCHENER ONTARIO
CANADA N2H 5B7

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