

-second application-

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: 1543911 ONTARIO 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:

MARK POLLARD
Name of Person
SPRUCEWOOD BRANDS
Firm/Company
50 CENTRE ST., P.O. BOX 430.
Address
WARKWORTH, ONTARIO CANADA K0K 3K0
City/State and Zip code
info@sprucewoodbrands.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARK POLLARD at (647) 966-6275
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
-enclosed-

**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. 1543911 ONTARIO 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. N/A

(FEI number, if applicable)

4. DEC. 23, 2002

(Date of incorporation)

5. perpetual

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

6. N/A - no transactions have been made to date.

(Date first transacted business in Florida, if prior to registration)

(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 50 CENTRE ST., WARKWORTH, ONTARIO CANADA K0K 3K0

(Principal office address)

BOX 430, WARKWORTH, ONTARIO CANADA K0K 3K0

(Current mailing address)

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

Name: CLAIRE TOMLIN,

Office Address: 238 E. SAN MARINO DR.,

MIAMI BEACH

(City)

, Florida 33139

(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: MARK POLLARD

Address: 122 CHURCH ST., WARKWORTH, ONTARIO K0K 3K0

Vice Chairman: ABEL BRANCO

Address: 122 CHURCH ST., WARKWORTH, ONTARIO K0K 3K0

Director: _____

Address: _____

Director: _____

Address: _____

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B. OFFICERS

President: MARK POLLARD

Address: 122 CHURCH ST., WARKWORTH, ONTARIO K0K 3K0

Vice President: _____

Address: _____

Secretary/Treasurer: ABEL BRANCO

Address: 122 CHURCH ST., WARKWORTH, ONTARIO K0K 3K0

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. _____

MARK POLLARD, President
(Typed or printed name and capacity of person signing application)

Request ID: 017506319
Demande n° :
Transaction ID: 57256749
Transaction n° :
Category ID: CT
Catégorie :

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

Date Report Produced: 2015/04/09
Document produit le :
Time Report Produced: 13:33:15
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

1 5 4 3 9 1 1 O N T A R I O I N C .

Ontario Corporation Number

Numéro matricule de la société (Ontario)

0 0 1 5 4 3 9 1 1

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

D E C E M B E R 2 3 D É C E M B R E , 2 0 0 2

and has not been dissolved.

et n'est pas dissoute.

Dated

Fait le

A P R I L 0 9 A V R I L , 2 0 1 5



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.