Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850) 205-8842

Fax Number : (850)878-5368

Conter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. Email Address:

FOREIGN PROFIT/NONPROFIT CORPORATION

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Certified Copy	0
Page Count	0.5
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Camco USA GP, Inc

JUL 0 2 2015

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COVER LETTER

TO:		Filing Seion of Co		tions					
SUBJ	ECT:	Camco l	JSA C	iP, Inc.					
2420				Name	of corpora	ition - mi	ist include suffix		
Dear S	ir or M	adem:							
"Certif	ficate of	f Existen	c e." a	by Foreign C or "Certificat rporation to	c of Good	Standing	" and check are su	act Bu ibmitte	siness in Florida," ed to register the
Please	return	all corres	pond	ence concer	ning this m	atter to th	ie following:		
Валту (Cameror	1							
				-	Name	e of Perso	on		
Cameo	USA G	P, Inc.							
					Firm/	Company	,		
365 Ru	e de Lo	uvain Out	ડા						
					A	ddress			
Montre	al. Quel	bec, H2N	2J1 C	anada					
					City/Sta	ite and Zi	p code		
bcamer	ron@ph	ilhobar.co							
			E	-mail addres	s: (to be u	sed for fu	ture annual report	notifi	cation)
For fur	ther in	formation	con	erning this r	matter, ple	ase cali:			
Antony	y Camer	ОЛ .			at (, 5	02-9596		
	Nami	e of Perso	ΣΠ		A	rea Code	& Daytime Telep	hone N	Number
STREET/COURIER ADDRESS: New Filing Section				MAILING ADDRESS: New Filing Section Division of Corporations					
Division of Corporations Clifton Building						P.O. Box 6327			
2661 Executive Center Circle Tallahassee, FL 32301					Tallahassec,	FL 32	2314		
	Tallal	iassee, F	L 32.	301					
Enclos	ed is a	check for	the i	following am	ount:				
⊡ \$ 70).00 Fil	ing Fee	۵	\$78.75 Filis Certificate			3.75 Filling Fee & rtified 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.

	•		dopted for the purpose of transacting business in Flor	ida)
Delaw	Are law of which it is incorporated)	3.	n/a	
(State or country und	er the law of which it is incorporated)		(FEI number, if applicable)	
1/2	9/2015 (corporation)	5.	perpetual	
(Date of it	corporation)	.	(Duration: Year corp. will cease to exist or "perpetu	al")
	(Date first transacted busines (SEE SECTIONS 607.1501 & 607	s in 7.15	Florida, if prior to registration) 22, F.S., to determine penalty liability)	
365 Rue de Louvain C	luest, Montreal, Quebec, H2N 2J1 Can	ada	in the state of th	. ~
	(Principal office a	ıddr	ess)	
365 Rue de Louvain (Duest, Montreal, Quebec, H2N 2J1 Car	nadu	}-: ::::	
	(Current mailing a	ddr	:55)	<u> </u>
			ነ ነ ነ ነ ነ ነ ነ ነ ነ ነ ነ ነ ነ ነ ነ ነ ነ ነ ነ	<u> </u>
Name and street ad	dress of Florida registered agent: (P.O	. Box NOT acceptable)	<u> </u>
Name:	C T Corporation System		हरू भूर) ११४	<u>~</u> 9
Tice Address:	1200 South Pine Island Road			# 4 4
	Plantation		Florida 33324	
	(City)		, Florida	
signated in this app rther agree to comp	s registered agent and to accept se lication, I hereby accept the appol	nin. es re	ee of process for the above stated corporation a ent as registered agent and agree to act in this elative to the proper and complete performance my position as registered agent.	capaci

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 Barry Cameron 365 Rue de Louvain Ouest, Montreal, Quebec, H2N 2J1 Canada Vice Chairman: Address: Director: _ Address: _ Director: Address: **B. OFFICERS** Barry Cameron President: 365 Rue de Louvain Ouest, Montreal, Quebec, H2N 2J1 Canada Address: Vice President: Antony Cameron 365 Rue de Louvain Ouest, Montreal, Quebec, H2N 2J1 Canada Barry Cameron Address: 365 Rue de Louvain Ouest, Muntreal, Quebec, H2N 2J1 Canada Treasurer: __ Address: ___ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 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. Antony Cameron

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CAMCO USA GP, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-NINTH DAY OF JUNE, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

5683470 8300

150986045

You may varify this certificate enline at corp.dolaware.gov/authvor.shtml

Jeffrey W. Bullock, Secretary of State

OTHENTACATION: 2511260

DATE: 06-29-15