

FL5000005100

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

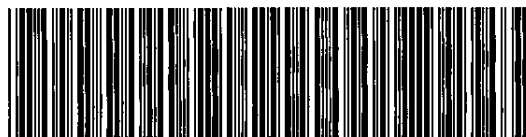
☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:



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11/18

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Highland Creek Concepts, 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:

Chris Murtha

Name of Person

Chris Murtha Accounting & Tax Services, LLC

Firm/Company

2800 Placida Rd Ste 104

Address

Englewood, FL 34224

City/State and Zip code

chris@murthaaccounting.com

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

For further information concerning this matter, please call:

Chris Murtha

Name of Person

at (941) 828-1280

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:

- | | | | |
|--|--|---|---|
| <input checked="" type="checkbox"/> \$70.00 Filing Fee | <input type="checkbox"/> \$78.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$78.75 Filing Fee & Certified Copy | <input type="checkbox"/> \$87.50 Filing Fee, Certificate of Status & Certified Copy |
|--|--|---|---|



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 23, 2014

CHRIS MURTHA
2800 PLACIDA RD., STE. 104
ENGLEWOOD, FL 34224

SUBJECT: HIGHLAND CREEK CONCEPTS, INC.
Ref. Number: W14000076024

We have received your document for HIGHLAND CREEK CONCEPTS, INC. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Maryanne Dickey
Regulatory Specialist II

Letter Number: 014A00027127

2800 Placida Rd Ste 104
Englewood, FL 34224

Phone: 941-828-1280

Fax: 941-828-1283

**Chris Murtha
Accounting & Tax
Services, LLC**

To: New Filing Section Div. of Corporations **From:** Chris Murtha

Fax: **Pages:** 5

Phone: **Date:** 11-10-15

Re: Attn Maryanne Dickey **cc:**

☐ **Urgent** ☐ **For Review** ☐ **Please Comment** ☐ **Please Reply** ☐ **Please Recycle**

• **Comments:**

Ms. Dickey,

Re: Document# W14000076024

Please find the enclosed revised Cover Letter and Application by Foreign Corporation for Highland Creek Concepts, Inc. and its Certificate of Compliance and Good Standing from Industry Canada as requested.

Thank you for your attention to this matter.

**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. **Highland Creek Concepts, 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. **93-1204447**

(FEI number, if applicable)

4. **August 7, 2006**

(Date of incorporation)

5. **Perpetual**

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

6. **December 1, 2014**

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

7. **4554 Sunburst Ave North Port, FL 34286**

(Principal office address)

2800 Placida Rd Ste 104 Englewood, FL 34224

(Current mailing address)

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

Name: **Chris Murtha**

Office Address: **2800 Placida Rd Ste 104**

Englewood

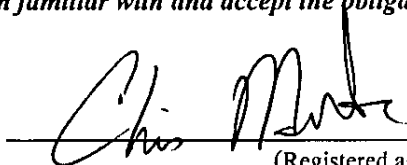
(City)

, Florida **34224**

(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: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Martin Mifsud

Address: 252 Portview Rd

Port Perry, Ontario L9L 1B4

Vice President: Cindy Fiering

Address: 252 Portview Rd

Port Perry, Ontario L9L 1B4

Secretary: _____

Address: _____

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. Martin Mifsud President

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



Industry
Canada

Industrie
Canada

15 NOV 16 AM 8:12
CORPORATE SERVICES
ATLANTA, FLORIDA

Certificate of Compliance

Canada Business Corporations Act
s. 263.1

Certificat de conformité

Loi canadienne sur les sociétés par actions
art. 263.1

HIGHLAND CREEK CONCEPTS INC.

Corporate name / Dénomination sociale

660857-4

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

2015-11-09

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