

F15000005533

(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:

Office Use Only



000279964120

12/14/15--01018--024 **70.00

FILED
2015 DEC 14 P 4:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DEC 15 2015

3 MASON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CYCLEONE FINANCIAL GROUP 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:

LOGAN RILEY

Name of Person

CYCLEONE FINANCIAL GROUP INC.

Firm/Company

555 DOG TRACK ROAD

Address

LONGWOOD, FL 32750

City/State and Zip code

LOGAN@CYCLEONEFINANCIAL.COM

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

For further information concerning this matter, please call:

LOGAN RILEY

407

792-9266

at ()

Name of Person

Area Code

Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration 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

**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.*

CYCLEONE FINANCIAL GROUP INC.

1. _____
(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 3. 98-1276055
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. OCTOBER 23, 2015 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)

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

7. 555 DOG TRACK ROAD LONGWOOD, FL 32750
(Principal office address)

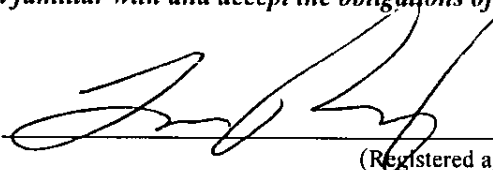
(Current mailing address, if different)

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

Name: LOGAN RILEY
Office Address: 122 POLO LANE
SANFORD, Florida 32771
(City) (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.

FILED
2015 DEC 14 P 4:55
SECRETARY OF STATE
TALLAHASSEE FLORIDA

11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: LOGAN RILEY

Address: 122 POLO LANE
SANFORD, FL 32771

Vice Chairman: MARK RILEY

Address: 122 POLO LANE
SANFORD, FL 32771

Director: RANDOLPH PINNA

Address: 806-390 BAY STREET
TORONTO ON M5H 2Y2 CANADA

Director:

Address:

B. OFFICERS

President: LOGAN RILEY

Address: 122 POLO LANE
SANFORD, FL 32750

Vice President:

Address:

Secretary: RANDOLPH PINNA

Address: 806-390 BAY STREET TORONTO ON M5H 2Y2 CANADA

Treasurer: MARK RILEY

Address: 122 POLO LANE SANFORD, FL 32771

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 11 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. LOGAN RILEY

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

FILED
2015 DEC 14 P 4:55
CLERK OF STATE
TALLAHASSEE, FLORIDA



Industry
Canada

Industrie
Canada

Certificate of Existence

Canada Business Corporations Act
s. 263.1(1)(c)

Certificat d'existence

Loi canadienne sur les sociétés par actions
art. 263.1(1)

CYCLEONE FINANCIAL GROUP INC.

Corporate name / Dénomination sociale

948525-2

Corporation number / Numéro de société

I HEREBY CERTIFY that the corporation
named above was in existence under the
Canada Business Corporations Act on 2015-
12-02 (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 2015-12-02 (AAAA-MM-JJ).

Virginie Ethier

Director / Directeur

2015-12-02

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