

12/2016 12: :44 M From: 850617 883 175  
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Florida Department of State  
 Division of Corporations  
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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

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**\*\*Enter 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**  
**Pharmacommunications Systems Inc.**

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 TALLAHASSEE, FLORIDA

Certificate of Status	0
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Page Count	05
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K. SALY  
 EXAMINER

FEB 15

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** PHARMACOMMUNICATIONS SYSTEMS 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:

RONALD G. MAHEU  
Name of Person  
PHARMACOMMUNICATIONS SYSTEMS INC.  
Firm/Company  
505 APPLE CREEK BLVD., UNIT 5  
Address  
MARKHAM, ONTARIO. L3R 5B1 CANADA  
City/State and Zip code  
RMAHEU@PHARMACOMMUNICATIONS.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RONALD G. MAHEU at ( 905 ) 477-3100 EXT. 223  
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.*

1. PHARMACOMMUNICATIONS SYSTEMS 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. DELAWARE 3. 36-4789721  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. JULY 10, 2014 5. \_\_\_\_\_  
(Date of incorporation) (Date of duration, if other than perpetual)

6. NOT APPLICABLE, Upon Filing  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 505 APPLE CREEK BLVD., UNIT 5, MARKHAM, ONTARIO. L3R 5B1 CANADA  
(Principal office address)

(Current mailing address, if different)

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

Name: C T Corporation System  
Office Address: 1200 South Pine Island Road  
Plantation, FL 33324, Florida  
(City) (Zip code)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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.*

C T Corporation System

By: April Wittenwyler April Wittenwyler, Ast. Secretary  
(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.

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TALLAHASSEE, FLORIDA

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

**A. DIRECTORS**

Chairman: RONALD G. MAHEU

Address: 505 APPLE CREEK BLVD., UNIT 5, MARKHAM, ONTARIO. L3R 5B1 CANADA

Vice Chairman:

Address:

Director: NICOLE F. ARCHAMBAULT

Address: 505 APPLE CREEK BLVD., UNIT 5, MARKHAM, ONTARIO. L3R 5B1 CANADA

Director:

Address:

**B. OFFICERS**

President: RONALD G. MAHEU

Address: 505 APPLE CREEK BLVD., UNIT 5, MARKHAM, ONTARIO. L3R 5B1 CANADA

Vice President:

Address:

Secretary: NICOLE F. ARCHAMBAULT

Address: 505 APPLE CREEK BLVD., UNIT 5, MARKHAM, ONTARIO. L3R 5B1 CANADA

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 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. RONALD G. MAHEU, President and Director

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

# Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PHARMACOMMUNICATIONS SYSTEMS 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 TWELFTH DAY OF FEBRUARY, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

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2016 FEB 12 AM 9:38  
SECRETARY OF STATE  
JILL HASSELL, FIDMID



*JWB*  
Jeffrey W. Bullock, Secretary of State

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You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

Authentication: 201822858

Date: 02-12-16