

F16000001015

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

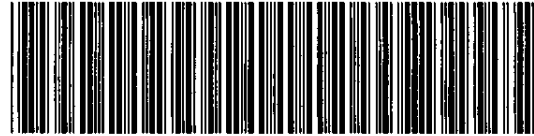
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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01/23/16--01017--015 **70.00

FILED
16 FEB 29 PM 3:23
TALLAHASSEE, FLORIDA

MAR 03 2016

Y SULKER

~~616 - 7730~~



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 3, 2016

HERMAN SINGH
600 RINEHART RD, SUITE 3118
LAKE MARY, FL 32746

SUBJECT: 1845023 ONTARIO INC.
Ref. Number: W16000007730

We have received your document for 1845023 ONTARIO 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 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) 245-6051.

Yasemin Y Sulker
Regulatory Specialist II

Letter Number: 416A00002322

COVER LETTER

TO: Registration Section
Division of Corporations

1845023 ONTARIO INC

SUBJECT: _____
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:
HERMAN SINGH

_____	Name of Person
HERMAN SINGH & ASSOCIATES INC	
_____	Firm/Company
600 RINEHART RD , SUITE 3118	
_____	Address
LAKE MARY, FL 32746	
_____	City/State and Zip code
HERMAN@HSTAXES.COM	
_____ E-mail address: (to be used for future annual report notification)	

For further information concerning this matter, please call:

HERMAN SINGH	407	831-1399
_____	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:

- | | | | |
|--|--|---|---|
| <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 |
|--|--|---|---|

**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.*

1845023 ONTARIO INC

1. _____
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

1845023 ONTARIO INC

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
ONTARIO, CANADA

2. _____ 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)
3/8/2011

4. _____ 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)
1/1/2014

6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
8 THACKERY DRIVE, AJAX, ONTARIO, CANADA L1T 0B7

7. _____
(Principal office address)
8 THACKERY DRIVE, AJAX, ONTARIO, CANADA L1T 0B7

(Current mailing address, if different)

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

SULARI C. GEEGANAGE

Name: _____

600 RINEHART RD, SUITE 3118

Office Address: _____

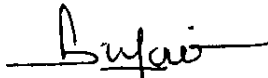
LAKE MARY

32746

_____, Florida _____
(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
16 FEB 29 PM 3:23
ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE 01-11-2011 BY 60322 UCBAW

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: SULARI CHANDILOKU GEEGANAGE
8 THACKERY DRIVE

Address: AJAX, ONTARIO, CANADA L1T 0B7

Director: _____

Address: _____

B. OFFICERS

President: SULARI CHANDILOKU GEEGANAGE

Address: 8 THACKERY DRIVE

Address: AJAX, ONTARIO, CANADA L1T 0B7

Vice President: _____

Address: _____

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 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. SULARI CHANDILOKU GEEGANAGE

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

16 FEB 29 PM 3:23
CLERK OF SUPERIOR COURT
JANET M. HARRIS, CLERK
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

Request ID: 018640467
Demande n° :
Transaction ID: 60287632
Transaction n° :
Category ID: CT
Catégorie :

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

Date Report Produced: 2016/02/18
Document produit le :
Time Report Produced: 10:06:49
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 8 4 5 0 2 3 O N T A R I O I N C .

Ontario Corporation Number

Numéro matricule de la société (Ontario)

0 0 1 8 4 5 0 2 3

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

M A R C H 0 8 M A R S , 2 0 1 1

and has not been dissolved.

et n'est pas dissoute.

Dated

Fait le

F E B R U A R Y 1 8 F É V R I E R , 2 0 1 6



Director
Directeur