

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

****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

River Trace Garden Apartments Inc.

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$78.75

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Corporate Filing Menu

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
16 APR 23 PM 3:36
W16-32695

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: River Trace Garden Apartments 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:
Christopher J. Leff, Esq.

Name of Person

Paul Frank + Collins P.C.

Firm/Company

P.O. Box 1307

Address

Burlington, VT 05402-1307

City/State and Zip code

mia.carrier@grtinc.com

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

For further information concerning this matter, please call:

Christopher J. Leff, Esq.

802

658-2311

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.*

River Trace Garden Apartments 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)

Canada

2. _____ 3. _____
(State or country under the law of which it is incorporated) (FBI number, if applicable)
4. 04/21/2016 5. Perpetual
(Date of incorporation) (Date of duration, if other than perpetual)

upon filing

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

7. 101-2860 ch. des Quatre-Bourgenis, Quebec, QC G1V1Y3 Canada
(Principal office address)

(Current mailing address, if different)

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

Name: CT Corporation System

Office Address: 1200 South Pine Island Road
Plantation, Florida 33324
(City) (Zip code)

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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.

Cristina Lam

Cristina Lam, Vice Present

(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: Mia Carrier

Address: 101-2860 ch. des Quatre-Bourgeois, Quebec, QC G1V1Y3 Canada

Director: _____

Address: _____

B. OFFICERS

President: Mia Carrier

Address: 101-2860 ch. des Quatre-Bourgeois, Quebec, QC G1V1Y3 Canada

Vice President: _____

Address: _____

Secretary: Mia Carrier

Address: 101-2860 ch. des Quatre-Bourgeois, Quebec, QC G1V1Y3 Canada

Treasurer: Mia Carrier

Address: 101-2860 ch. des Quatre-Bourgeois, Quebec, QC G1V1Y3 Canada

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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. Mia Carrier, President

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



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)

River Trace Garden Apartments Inc.
Les Appartements River Trace Garden Inc.

Corporate name / Dénomination sociale

972047-2

Corporation number / Numéro de société

I HEREBY CERTIFY that the corporation
named above was in existence under the
Canada Business Corporations Act on 2016-
05-02 (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 2016-05-02 (AAAA-MM-JJ).

Virginie Ethier

Director / Directeur

2016-05-02

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