

F16000003750

\_\_\_\_\_  
(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:

W16-57716

Office Use Only



900288716499

08/18/16--01004---014 \*\*70.00

FILED  
2016 AUG 22 AM 8:42  
RECEIVED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
16 AUG 22 08:41:44

K. GALT  
EXAMINER  
AUG 23

## CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Clarendon Assets LTD, INC.

Signature \_\_\_\_\_

Requested by: Seth

Name \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_

Walk-In \_\_\_\_\_ Will Pick Up \_\_\_\_\_

\_\_\_\_ Art of Inc. File \_\_\_\_\_  
\_\_\_\_ LTD Partnership File \_\_\_\_\_  
\_\_\_\_ Foreign Corp. File \_\_\_\_\_  
\_\_\_\_ L.C. File \_\_\_\_\_  
\_\_\_\_ Fictitious Name File \_\_\_\_\_  
\_\_\_\_ Trade/Service Mark \_\_\_\_\_  
\_\_\_\_ Merger File \_\_\_\_\_  
\_\_\_\_ Art. of Amend. File \_\_\_\_\_  
\_\_\_\_ RA Resignation \_\_\_\_\_  
\_\_\_\_ Dissolution / Withdrawal \_\_\_\_\_  
\_\_\_\_ Annual Report / Reinstatement \_\_\_\_\_  
\_\_\_\_ Cert. Copy \_\_\_\_\_  
\_\_\_\_ Photo Copy \_\_\_\_\_  
\_\_\_\_ Certificate of Good Standing \_\_\_\_\_  
\_\_\_\_ Certificate of Status \_\_\_\_\_  
\_\_\_\_ Certificate of Fictitious Name \_\_\_\_\_  
\_\_\_\_ Corp Record Search \_\_\_\_\_  
\_\_\_\_ Officer Search \_\_\_\_\_  
\_\_\_\_ Fictitious Search \_\_\_\_\_  
\_\_\_\_ Fictitious Owner Search \_\_\_\_\_  
\_\_\_\_ Vehicle Search \_\_\_\_\_  
\_\_\_\_ Driving Record \_\_\_\_\_  
\_\_\_\_ UCC 1 or 3 File \_\_\_\_\_  
\_\_\_\_ UCC 11 Search \_\_\_\_\_  
\_\_\_\_ UCC 11 Retrieval \_\_\_\_\_  
\_\_\_\_ Courier \_\_\_\_\_



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 19, 2016

CAPITAL CONNECTION, INC.

SUBJECT: CLARENDON ASSETS LTD.  
Ref. Number: W16000057716

RECEIVED  
DEPARTMENT OF STATE  
16 AUG 22 PM 12:15

We have received your document for CLARENDON ASSETS LTD. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must read the same as the certificate plus the INC on line one, ie...."CLARENDON ASSETS LTD., INC.". This not an alternate name.

Also, please submit a legible copy of the officer page. The name of the officer is not clear.,

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) 245-6051.

Karen A Saly  
Regulatory Specialist II

Letter Number: 816A00017584

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Clarendon Assets LTD

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:

Harvey A. Ford

Name of Person

Ford & Ford, P.A.

Firm/Company

147 Second Avenue South, Suite 302

Address

St. Petersburg, FL 33701

City/State and Zip code

harvey@fordlawfirm.net and bgj@magma.ca (for future)

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

For further information concerning this matter, please call:

Harvey A. Ford

727

894-2907

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.**

CLARENDON ASSETS LTD. 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. \_\_\_\_\_ 3. \_\_\_\_\_  
Canada N/A  
(State or country under the law of which it is incorporated) (FEI number, if applicable)  
4. \_\_\_\_\_ 5. \_\_\_\_\_  
July 15th, 2010 N/A  
(Date of incorporation) (Date of duration, if other than perpetual)

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

7. \_\_\_\_\_  
474 Mandalay Avenue, Clearwater Beach, FL 33767  
(Principal office address)  
N/A  
(Current mailing address, if different)

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

Name: \_\_\_\_\_  
Your Capital Connection, Inc.  
Office Address: \_\_\_\_\_  
417 East Virginia Street, #1  
Tallahassee \_\_\_\_\_, Florida 32301  
(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.*



Seth Neeley as representative for Your Capital Connection, Inc.

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.

2016 AUG 22 AM 8:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

**A. DIRECTORS**

Chairman: Beata Garel-Jones

Address: 120 Lansdown Road South  
Ottawa, Ontario K1M 0N4

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: Beata Garel-Jones

Address: 120 Lansdown Road South  
Ottawa, Ontario K1M 0N4

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. Beata Garel-Jones, President

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

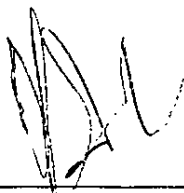
CANADA  
Province of Ontario  
To Wit:

)  
) To all whom these presents  
) may come, be seen or known

FILED  
2016 AUG 22 AM 8:42  
CLERK OF THE COURT  
TALLAHASSEE, FLORIDA

I, Hugues Boisvert, a Notary Public, in and for the Province of Ontario, by Royal Authority duly appointed, residing at the City of Ottawa, in the Province of Ontario, DO CERTIFY AND ATTEST that the paper-writing hereto annexed is a true copy of the Certificate of Compliance of CLARENDON ASSETS LTD. dated the 15<sup>th</sup> day of August, 2016, the said copy having been compared by me with the said original document, an act whereof being requested I have granted under my Notarial Form and Seal of Office to serve and avail as occasion shall or may require.

IN TESTIMONY WHEREOF I have hereto subscribed by name and affixed by Notarial Seal of Office at the City of Ottawa, in the Province of Ontario this 15<sup>th</sup> day of August, 2016.



---

HUGUES BOISVERT  
283 Sussex Drive, Ottawa,  
Ontario Canada K1N 6Z1  
A Notary Public in and for the Province of Ontario.



Government  
of Canada

Gouvernement  
du Canada

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2016 AUG 22 AM 8:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## Certificate of Compliance

*Canada Business Corporations Act*  
s. 263.1

## Certificat de conformité

*Loi canadienne sur les sociétés par actions*  
art. 263.1

CLARENDON ASSETS LTD.

Corporate name / Dénomination sociale

760300-2

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

2016-08-15

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