# F17000000457

(Re	questor's Name)	)
(Ad	dress)	
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(Cit	ty/State/Zip/Phor	ne #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Na	me)
(Do	ocument Number	<del>)</del>
Certified Copies	_ Certificate	es of Status
Special Instructions to		
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Office Use Only



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TO L C OENE THE

**S Warren**JAN 31 2017



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

December 2, 2016

ANDREW FRANKEL 1000 DE LA GAUCHETIERE OUEST, SUITE 3960 MONTREAL, QUEBEC, H3B-4W5

SUBJECT: SIA INNOVATIONS INC. Ref. Number: W16000080918

We have received your document for SIA INNOVATIONS INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

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 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.

Stacey M Warren Regulatory Specialist II

Letter Number: 416A00025726

### **COVER LETTER**

TO:	Registration Section Division of Corporat	ons			
SUBJ	SIA Innovation:	Inc.			
		Name of corporat	ion ·	must include suffix	
Dear S	Sir or Madam:				
"Certi	nclosed "Application by ficate of Existence," or referenced foreign corp	"Certificate of Good S	tand	Authorization to Transac ling" and check are subr s in Florida.	t Business in Florida," nitted to register the
	return all corresponder v Frankel	nce concerning this ma	tter	to the following:	
		Name	of P	erson	
SIA In	novations Inc.				
1000 d	e la Gauchetiere ouest, S	Firm/C	omp	any	
Montre	eal, Quebec H3B 4W5 (C		dres	S	
andy.fr	ankel@siainnovations.co	•	e an	d Zip code	
	E-	nail address: (to be use	d fo	r future annual report no	otification)
For fur	ther information conce	rning this matter, pleas	se ça	11:	
* •		514 at (		842-8816	
	Name of Person	Area C	ode	Daytime Teleph	one Number
	STREET/COURIER Registration Section Division of Corporati Clifton Building 2661 Executive Cente Tallahassee, FL 3230	ons or Circle		MAILING AD Registration Se Division of Cor P.O. Box 6327 Tallahassee, FL	ction porations
		llowing amount: 78.75 Filing Fee & Certificate of Status	0	\$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.

SIA INNOVATI			
(Enter name of co	orporation; must include "INCORPORAT orp," "Inc," "Co," or "Corp.")	ED," "COMPANY," "CORPORATI	ion,"
(If name unavaila	ble in Florida, enter alternate corporate na	ame adopted for the purpose of transa	cting business in Florida)
CANADA		_ 3	
(State or country 1980-12-03	y under the law of which it is incorporated	3. (FEI number, in PERPETUAL	f applicable)
	of incorporation)	(Date of duration, if other than perpetual)	
<u> </u>	(Date first transacted busine	ess in Florida, if prior to registration)	hility
2255 GLADES R	D, SUITE 324A, BOCA RATON, FL 334	07.1502, F.S., to determine penalty lia	iomty)
		rincipal office address)	<u> </u>
	(11	meipar office address)	
	(Current n	nailing address, if different)	
	(cu)		
. Name and stree	et address of Florida registered agent:	(P.O. Box NOT acceptable)	
Name:	NRAI SERVICES, INC.	· · · · · · · · · · · · · · · · · · ·	general sections and the section of
Office Address:	1200 SOUTH PINE ISLAND ROAD		
	PLANTATION	Florida 33324 (Zip code)	
	(City)	(Zip code)	
. Registered age	ent's acceptance:		SIA OR
laving been nam esignated in this urther agree to co	ed as registered agent and to accept application, I hereby accept the applomply with the provisions of all statually amiliar with and accept the obligation	ointment as registered agent and ates relative to the proper and con	agree to act in this capacity. oplete performance of my
	Denise Bell Deni	se Bell - Asst Secretary	
	(Registr	ered 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. DIRE	ECTORS			
Chairman:	Ross Salvo			
	4755 Metropolitain Est, Apt. 1107 - Montreal, Quebec H1R 0C2 (Canada)		· -	
Audress:				
Vice Chai	rman:		-	
Address:			<u>-</u> .	
-	Andrew Frankel		<u></u>	· · ·
Director:	1281 rue Tecumseh - Dollard des Ormeaux, Quebec H9A 3C9 (Canada)	<del></del>	<del></del>	
Address:	. 201 tue l'oument. Donnée des criments que ce l'origine le communité de la communité des la communité de la communité des la communité de la communité des la communité de la	<u> </u>		
Director:	Alexandre Lanoue			
	3501 rue Ovila-Hamel - Saint-Hubert, Quebec J3Y 9C3 (Canada)			
		<del></del>	<u>uni</u>	
B. OFF	ICERS	(1) (3)	1 :34	1
President:	Ross Salvo		+16 ()	
Address:	4755 Metropolitain Est, Apt. 1107 - Montreal, Quebec H1R 0C2 (Canada)	. 9	ับ_	П
		STA	٠,,	<u> </u>
Vice Pres	Andrew Frankel ident:	ΑŒ	0	
Address:	1281 rue Tecumseh - Dollard des Ormeaux, Quebec H9A 3C9 (Canada)	: 		
Secretary:	Ross Salvo			
Address:	4755 Metropolitain Est, Apt. 1107 - Montreal, Quebec H1R 0C2 (Canada)			
Treasurer	Orazio Chiovitti			
Address:	5097 rue La Durantaye - St-Leonard, Quebec H1R 1Y8 (Canada)			
NOTE:	If necessary, you may attach an addendum to the application listing additional officers a	and/or di	rectors.	
12	Andrew Franke	1, Vic	e Pres	ident
are true a a third de	Signature of Director or Officer cer or director signing this document (and who is listed in number 11 above) affirms that and that he or she is aware that false information submitted in a document to the Department of the Depar			
13. And	rew Frankel, Vice-President  (Typed or printed name and capacity of person signing application)	<del></del>		

## **Certificate of Compliance**

## Certificat de conformité

Canada Business Corporations Act s. 263.1 Loi canadienne sur les sociétés par actions art. 263.1

SIA INNOVATIONS INC.

Corporate name / Dénomination sociale

104209-2

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 cidessus 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

Linginia Ethian

Director / Directeur

2016-12-16

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