

A70000004021

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

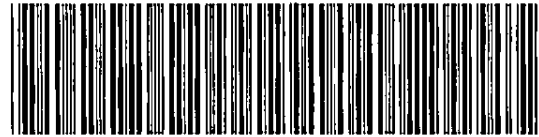
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

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FILED  
17 SEP -5 PM 1:42  
STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

D. SCOTT  
SEP 6 2017

***POWELL CARNEY MALLER, P.A.***

MARY JO CARNEY  
KAREN E. MALLER  
JAMES N. POWELL  
DON DOUGLAS RAMSAY

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ONE PROGRESS PLAZA, SUITE 1210  
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[jnpowell@powellcarneylaw.com](mailto:jnpowell@powellcarneylaw.com)

August 31, 2017

Florida Department of State  
Division of Corporations  
Corporate Filings  
Post Office Box 6327  
Tallahassee, Florida 32314

Re: Earthscape Play Inc.  
Application by Foreign Corporation for Authorization to Transact Business in Florida

*TO WHOM IT MAY CONCERN:*

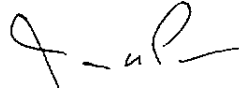
Enclosed is an original and one copy of an Application by Foreign Corporation for Authorization to Transact Business in Florida for the above referenced corporation. Also enclosed is a check in the amount of \$87.50 to cover filing fees in the amount of \$70.00, cost for a certified copy in the amount of \$8.75 and cost for a Certificate of Status in the amount of \$8.75.

If the Application by Foreign Corporation for Authorization to Transact Business in Florida is in order, would you please cause the certified copy to be returned to the attention of the undersigned.

Thank you for your assistance and cooperation.

Very truly yours,

POWELL CARNEY MALLER, P.A.



James N. Powell

JNP/ceo  
Enclosures: as stated

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TALLAHASSEE, FLORIDA

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** EARTHSCAPE PLAY 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:

DARRYL WADE

Name of Person

EARTHSCAPE PLAY INC.

Firm/Company

7215 WELLINGTON RD. 86

Address

WALLENSTEIN, ONTARIO, CANADA N0B 2S0

City/State and Zip code

DARRYL.WADE@EARTHSCAPEPLAY.COM

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

For further information concerning this matter, please call:

DARRYL WADE at (519) 669-2972 x8208

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. EARTHSCOPE PLAY 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. CANADA 3. \_\_\_\_\_  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. AUGUST 31, 2016 5. \_\_\_\_\_  
(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. 7215 WELLINGTON RD. 86, WALLENSTEIN,  
(Principal office address) ONTARIO NOB 2SD

N/A  
(Current mailing address, if different)

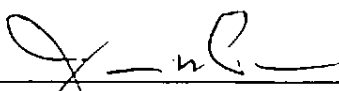
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: JAMES N. POWELL

Office Address: ONE PROGRESS PLAZA, SUITE 1210  
ST. PETERSBURG, Florida 33701  
(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.

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

**A. DIRECTORS**

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

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

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

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

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

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

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

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

**B. OFFICERS**

President: MARK SCHWARZ

Address: 1676 FLORADALE RD., R.R. #1  
ELMIRA, ONTARIO, CANADA N3B 2Z1

Vice President: \_\_\_\_\_

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

Secretary: SAMUEL EZRA BAUMAN

Address: 13 DUKE STREET, ELMIRA, ONTARIO N3B 2W4

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. MARK SCHWARZ, PRESIDENT

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

Request ID: 020627079  
Demande n° :  
Transaction ID: 65418188  
Transaction n° :  
Category ID: CT  
Catégorie :

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

Date Report Produced: 2017/08/22  
Document produit le :  
Time Report Produced: 14:50:13  
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

**EARTHSCAPE PLAY INC.**

Ontario Corporation Number

Numéro matricule de la société (Ontario)

**002534734**

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

**AUGUST 31 AOÛT, 2016**

and has not been dissolved.

et n'est pas dissoute.

Dated

Fait le

**AUGUST 22 AOÛT, 2017**



Director  
Directeur

FILED  
17 SEP -5 PM 1:43  
MINISTRY OF GOVERNMENT SERVICES

The issuance of this certificate in electronic form is authorized by the Ministry of Government Services.

La délivrance du présent certificat sous forme électronique est autorisée par le Ministère des Services gouvernementaux.