F18000001522

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
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S. WARREN MAR 3 0 2018

COVER LETTER

TO:	Registration Section Division of Corporations					
(1 T 1 T 2 T	THCW La	nd Holdings, Inc.				
SUBJ	ECT:	Name of co	orporation -	must include suffix		
Dear S	Sir or Madam:		•			
"Certi	ficate of Existence		Good Stand	ing" and check are sub	ct Business in Florida." mitted to register the	
Please	return all correspo	ondence concerning	this matter t	o the following:		
Domer	nic Reonegro, CPA,	CA				
			Name of Pe	erson		
Holand	l Real Estate Group					
			Firm/Comp	any		
6700 S	aint-Jacques					
			Addres		•	
Montre	eal, QC H4B 1V8					
		C	ity/State and	l Zip code		
domen	ic @holandleasing.c	com				
		E-mail address: (to	be used fo	r future annual report r	notification)	
For fu	rther information o	concerning this matte	r, please ca	N:		
Domer	nic Reonegro	21 (514	519-1049		
	Name of Person	_	Area Code	Daytime Telepi	hone Number	
	STREET/COUR Registration Sec Division of Corp Clifton Building 2661 Executive Tallahassee, FL	orations Center Circle		MAILING A Registration S Division of Co P.O. Box 6327 Tallahassee, F	ection orporations 7	
Enclos	sed is a check for t	he following amount	:			
□ \$70	0.00 Filing Fee	S78.75 Filing Fe Certificate of St		\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy	

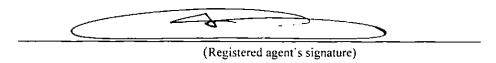
APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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.

THCW Land H	oldings, Inc				
	orporation; must include "INCORPORATED," "(forp," "Inc," "Co," or "Corp.")	COMPANY," "CORPORATION	<u> </u>		
(If name unavail	able in Florida, enter alternate corporate name ado	pted for the purpose of transacting	g business in Florida)		
Delaware 2.	elaware 82-4521450				
February 13, 20	y under the law of which it is incorporated) 18				
4. (Date of incorporation) 5. (Date of duration)			than perpetual)		
	(Date first transacted business in FI (SEE SECTIONS 607.1501 & 607.1502 e Boulevard, West Palm Beach, FL 33409	orida, if prior to registration) , F.S., to determine penalty liabil	ity)		
, · <u> </u>	(Principal	office address)			
-	(Current mailing a	ddress, if different)	2018 HAR		
8. Name and <u>stree</u> Name:	et address of Florida registered agent: (P.O. I Gad Bitton	Box <u>NOT</u> acceptable)	Sign 25 F		
Office Address:	2345 Okeechobee Blvd.	_	PH 4: 14		
	West Palm Beach	33409 Florida	Dr #		
	(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.



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: Vice Chairman: Gad Bitton Director: _ 2345 Okeechobee Boulevard Address: West Palm Beach, FL 33409 **B. OFFICERS** Gad Bitton President: 2345 Okeechobee Boulevard Address: _ West Palm Beach, FL 33409 Vice President: Address: _____ Address: _____ Address: _____ **NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors. 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. _____

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

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "THCW LAND HOLDINGS, INC." IS DULY

INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS

OF THIS OFFICE SHOW, AS OF THE THIRTEENTH DAY OF FEBRUARY, A.D.

2018.

Authentication: 202142929

Date: 02-13-18