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SELRETARY OF STATE

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COVER LETTER

TO:	Registration Section	•			
	Division of Corporati	ons			
	118280 Canada	Inc.			
SUB.	IECT:			<u></u>	
		Name of corporati	on - must	include suffix	•
Dear :	Sir or Madam:				
"Cert	ificate of Existence," or	y Foreign Corporation for "Certificate of Good Separation to transact busing programmes."	anding"	and check are subt	
	e return all corresponde w Jimenez, Esq.	nce concerning this mat	ter to the	following:	
		Name	of Person		
Jimen	ez Law Offices			•	
	<u> </u>	Firm/C	ompany		
100 S	E 3rd Avenue, Suite 1514		шфапу		
	· ·	Ad	dress		
Fort I	auderdale, FL 33394				
		City/State	and Zip	code	
andre	w@jimenezlawoffices.com	n	_		
	E	mail address: (to be use	d for fut	ure annual report n	otification)
For f	urther information conc	erning this matter, pleas	e call:		
. 0	attion impression con-	vi, p. 100.			
Andrew Jimenez, Esq.		954	84	8.3111	
	Name of Person	at (Area () Code	Daytime Telep	hone Number
	STREET/COURIE Registration Section			MAILING A Registration S	
Division of Corporations			Division of Corporations		orporations
Clifton Building			P.O. Box 6327		
	2661 Executive Cer Tallahassee, FL 32			Tallahassœ, F	TL 32314
Encl	osed is a check for the	following amount:			
0 \$	770.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status		3.75 Filing Fee & tified Copy	S87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

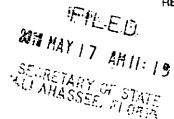
IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA. 118280 Canada Inc. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") 118280 Canada Corp. (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) 98-0131693 2. (FEI number, if applicable) (State or country under the law of which it is incorporated) (Date of duration, if other than perpetual) (Date of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 2937 Rue du Coin-des-Caps, Quebec City, Quebec, Canada G1W 2H5 (Principal office address) (Current mailing address, if different) 8. Name and street address of Florida registered agent; (P.O. Box NOT acceptable) Andrew Jimonez, Esq. Name: 100 SE 3rd Avenue, Suite 1514 Office Address: Fort Lauderdale Florida (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

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:	##EED		
A. DIRECTORS	MAHAY 17 AMII: 19		
Сһаіттап:	SECRETARY OF STATE		
Address:	HASSEE FLORES		
Vice Chairman:			
Address:			
Director:			
Address:			
Director:			
Address:			
B. OFFICERS			
Jacques Latlamme President:			
President:			
Address: Quebec City, Quebec, Canada G1W 2H5			
Vice President:			
Aukdress:			
<u> </u>			
Secretary:			
Address:			
Treasurer:	<u></u>		
Address:			
NOTE: of percessary, you may attach an addendum to the application listing additional	officers and/or directors.		
Jacques Laflamme 308AE577A74347D Signature of Director or Officer			
The officer or director signing this document (and who is listed in number 11 above) after are true and that he or she is aware that false information submitted in a document to the a third degree felony as provided for in s.817.155, F.S. Jacques Laflamme, President	firms that the facts stated herein e Department of State constitutes		
(Typed or printed name and capacity of person signing applicat	ion)		



Certificat d'attestation

Loi sur la publicité légale des entreprises (RLRQ, chapitre P-44.1)

J'atteste que l'entreprise portant le nom

118280 CANADA INC.

- est immatriculée depuis le 1er mars 1995 .
- n'est pas en défaut de déposer une déclaration de mise à jour annuelle.
- n'est pas en défaut de se conformer à une demande qui lui a été faite en vertu de l'article 73.
- n'est pas en voie de dissolution.
- n'est pas radiée.

Numéro de certification: 724076879

Le numéro de certification ci-dessus vous permet de consulter en tout temps ce document certifié à l'aide du service en ligne Vérifier un numéro de certification du Registraire des entreprises.

Fait le 14 mai 2018 pour le numéro d'entreprise du Québec 1143086123.

Registraire des entreprises



REZ-130 (2017-08)

Certificate of attestation

Law on the legal advertising of enterprises (RLRQ, Chapter P-44.1)

I attest that the enterprise named

118280 CANADA INC.

- Is registered since 1 March 1995.
- Is not in default of filing an updated annual report.
- Is not in default of conformity to the request made in virtue of article 73.
- Is not in the process of dissolution.
- Is not dissolved.

Certification number: 724076879

The above certificate number allows you to consult at any time this certified document through our online services Verify a certification number of the Enterprise Register.

Made on May 14, 2018 under the Quebec enterprise number 1143086123

Quebec Enterprise Register

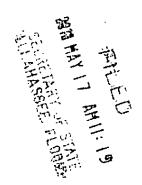
Revenue Quebec



CERTIFICATE OF ACCURATE TRANSLATION

The undersigned, <u>JOSIPA MARASOVIC</u> certifies that s/he is fluent in the <u>FRENCH</u> and English languages, that s/he made the attached translation from the attached document in the <u>FRENCH</u> language and, hereby, that the same is a true and complete translation to the best of his/her knowledge, ability, and belief.

(Signature of Translator)



STATE OF FLORIDA

COUNTY OF BROWARD

Sworn to (or affirmed) and subscribed before me this 14 day of May 45, 2018, by JOSIPA MARASOVIC.

Notary Public

Personally Known OR Produced Identification

ANDREW L. JIMENEZ

Type of Identification Produced