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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Be	usiness Entity Name)	
(De	ocument Number)	
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Special Instructions to	Filing Officer:	

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COVER LETTER

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i,

TO: Registration Section Division of Corporations				
SUBJECT: 2557649 ONTARI	O INC.			
	Name of corporation	- must include suffix		
Dear Sir or Madam:				
The enclosed "Application by Fo "Certificate of Existence," or "Ce above referenced foreign corpora	ertificate of Good Star	ding" and check are sub		,
Please return all correspondence	concerning this matter	to the following:		
Jessica Suddes				
	Name of	Person		
2557649 ONTARIO INC.				
	Firm/Com	pany	<u> </u>	2
3030 N. Rocky Point Dr. STE 150A	4			<u>=</u> TI
	Addre	ess		22
Tampa, FL 33607				
	City/State a	nd Zip code		录 〇
chefsexclusive@gmail.com				<u>ω</u>
E-mail	address: (to be used t	or future annual report n	iotification) = >=	.b
For further information concerning	ng this matter, please o	eall:		
Jessica Suddes	at (<u>647</u>	802-2044		
Name of Person	Area Cod	e Daytime Telepl	none Number	
STREET/COURIER Al Registration Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301		MAILING Al Registration So Division of Co P.O. Box 6327 Tallahassee, F	ection orporations	
Enclosed is a check for the follow	ving amount:			
	75 Filing Fee & tificate of Status	\$78.75 Filing Fee & Certified Copy	S87.50 Filing Fe Certificate of St	tatus &

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. 2557649 ONTA	RIO INC.		. <u> </u>			
	orporation; must include "INCORPORATI orp," "Inc," "Co," or "Corp.")	ED," "C	OMPANY," "CORPORATION	· · · · · · · · · · · · · · · · · · ·		
(If name unavail	able in Florida, enter alternate corporate na	me ado	oted for the purpose of transacting	g business in I	Florida)
2. CANADA		3.				
(State or countr	y under the law of which it is incorporated)	(FEI number, if ap	plicable)		
4 January 24, 2013	7	5				
· ·	of incorporation)	J	(Date of duration, if other	than perpetual)	
6. February, 2017						
770 Wynford Dr		2R6 ncipal c	office address)	y)	18 70	 T1
8 Name and stres	(Current m et address of Florida registered agent:		ddress, if different)	Assle, FLORDA	5 20 FK	
o. Hame and gares		(1.0. 1	ion <u>itor</u> acceptance	;— S.	ف	
Name:	Registered Agents Inc		_	Ű.	زي	
Office Address:	3030 N. Rocky Point Dr. STE 150A		_	٠,٠		
	Татра		_ , Florida <u>33607</u>			
	(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 Agents Inc.

Bill Havre - Assistant Secretary

(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:

Address: 111 Civic Square Gate, Unit 101 Aurora, ON L4G0S6	
lice Chairman	
/ice Chairman:	
Address:	
Director:	
Address:	<u></u>
· · · · · · · · · · · · · · · · · · ·	= : =
Director:	75
Address:	FILL 20
	<u> </u>
3. OFFICERS	PR TO
President: Jessica Suddes	GEV. 6: 3
Address: 111 Civic Square Gate, Unit 101	
Aurora, ON L4G0S6	
/ice President:	
Address:	
ecretary:	
Address:	
reasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional	al officers and/or directors.
2. Signature of Director or Officer	

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

13. Jessica Suddes, President

Request ID:

021944380

Demande n°: Transaction ID: 68849956

Transaction nº: Category ID: Catégorie :

Province of Ontario Province de l'Ontario

Ministry of Government Services Ministère des Services gouvernementaux Date Report Produced: 2018/07/30

Document produit le :

Time Report Produced: 09:35:32

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

2557649 ONTARIO INC.

Ontario Corporation Number

Numéro matricule de la société (Ontario)

002557649

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

JANUARY 24 JANVIER, 2017

and has not been dissolved.

et n'est pas dissoute.

Dated

Fait le

JULY 30 JUILLET, 2018

Salbara Clackitt

Director Directeur

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.