

AB0000004990

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

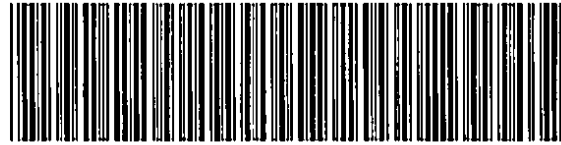
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2018 OCT 22 PM 7:57

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D. SCOTT
10/1/18

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Pollard Systems 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:

Bonnie Tuerlings

Name of Person

Pollard Banknote Limited

Firm/Company

140 Otter Street

Address

Winnipeg, Manitoba, Canada, R3T 0M8

City/State and Zip code

btuerlings@pbl.ca

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

For further information concerning this matter, please call:

Bonnie Tuerlings

204

474-2323 x559

at (_____) _____

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

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**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. Pollard Systems Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
2. Delaware 3. 32-0575584
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. August 3, 2018 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)
6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 1000 Flag Road, Adair, IA 50002
(Principal office address)
- 140 Otter Street, Winnipeg, Manitoba, R3T 0M8
(Current mailing address, if different)

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

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida 32301
(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.

Corporation Service Company
By: Linda Snook Linda Snook
(Registered agent's signature) Assistant VP

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: See Schedule "A"

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: _____

Address: _____

Vice President: _____

Address: _____

Secretary: _____

Address: _____

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. Douglas E. Pollard, Director & Co-Chief Executive Officer

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

SCHEDULE "A"
POLLARD SYSTEMS INC.

DIRECTORS

NAME	ADDRESS
Gordon O. Pollard	580 Park Boulevard West Winnipeg, Manitoba, R3P 0H4
John S. Pollard	86 Donnington Road Winnipeg, Manitoba, R3R 3S6
Douglas E. Pollard	132 Oak Street Winnipeg, Manitoba, R3M 3R3

OFFICERS

Name	Office Held	Address
Pollard, John S.	Co-Chief Executive Officer, President	86 Donnington Road Winnipeg, Manitoba, R3R 3S6
Pollard, Douglas E.	Co-Chief Executive Officer, Vice- President & Treasurer	132 Oak Street Winnipeg, Manitoba, R3M 3R3
Rose, Robert	Chief Financial Officer	74 Pine Valley Drive Winnipeg, Manitoba, R3K 1Y1
Richard, Riva J.	Secretary	80 Silver Springs Bay Winnipeg, Manitoba, R2K 4L4

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MAY 22 P. 7:57
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Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "POLLARD SYSTEMS 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 THIRD DAY OF OCTOBER, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "POLLARD SYSTEMS INC." WAS INCORPORATED ON THE THIRD DAY OF AUGUST, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL FRANCHISE TAXES HAVE BEEN ASSESSED TO DATE.

FILED
2018 OCT 3 11 57




Jeffrey W. Bullock, Secretary of State

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SR# 20186953156

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 203538007

Date: 10-03-18