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(Address)			
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(Ćity/State/Zip/	Phone #)		
PICK-UP WA	IT MAIL		
(Business Enti	ty Name)		
(Document Number)			
Certified Copies Certified Copies	ficates of Status		
Special Instructions to Filing Officer:			
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#### Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301 850.656.7956

Fax: 850.656.7953 www.Incserv.com

e-mail: info@incserv.com

## incservo

#### **ORDER FORM**

**TO** Florida Department of State

Division of Corporations, Clifton

Building

2661 Executive Center Circle

Tallahassee, FL 32301

corphelp@dos.myflorida.com

850-245-6051

**FROM** 

Melissa Stops

mstops@incserv.com

850.656.7953

REQUEST\_DATE 1/25/2019

**PRIORITY** Routine

OUR REF. # (Order ID#) 717487

**ORDER ENTITY** 

REGENT LEAF, INC.

#### PLEASE PERFORM THE FOLLOWING SERVICES:

REGENT LEAF, INC. (FL)

File the attached foreign qualification document

NOTES:

\$70.00 Authorized

Email address for annual report reminders: jacob@recordsearch.com

#### **RETURN/FORWARDING INSTRUCTIONS:**

ACCOUNT NUMBER: 120050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Friday, January 25, 2019 Page 1 of 1

### 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.

(Enter name of co "Inc" "Co.," "Co	rporation; must include "INCORPORATED," ' rp," "Inc," "Co," or "Corp,")	COMPANT, CORPORATION.	
	ble in Florida, enter alternate corporate name ad	O 1147143	
	under the law of which it is incorporated)		
1/25/2019	of incorporation)	(Date of duration, if other than	n perpetual)
	(Date first transacted business in I (SEE SECTIONS 607.1501 & 607.150) is Circle, Delray Beach, FL 33484	Florida, if prior to registration)  2, F.S., to determine penalty liability)	
·	(Principa	office address)	
	(Current mailing	address, if different)	10 JAN
. Name and stree	address of Florida registered agent: (P.O. Registered Agent Solutions, Inc.	Box NOT acceptable)	. v
Name: Office Address:	155 Office Plaza Drive, Suite A		AM 2: 3
mice Addiess.	Tallahassee	32301 , 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 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.

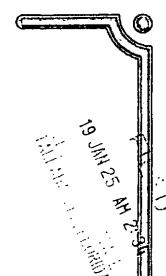
(Registered agent's signature)

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.

19 JAH 25 AH 2:34 11. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Vice Chairman: Address: Miriam Merkur Director: 23 Lesmill Road, Unit 205 Address: \_\_\_\_\_\_ Toronto, Ontario M3B 3P6 Canada B. OFFICERS Miriam Merkur President: 23 Lesmill Road, Unit 205 Address: Toronto, Ontario M3B 3P6 Canada Vice President: Miriam Merkur Secretary: 23 Lesmill Road, Unit 205, Toronto, Ontario M3B 3P6 Canada Address: \_\_\_\_ Miriam Merkur Treasurer: 23 Lesmill Road, Unit 205, Toronto, Ontario M3B 3P6 Canada Address: \_ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Musey Meaher 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. Miriam Merkur, President/Secretary/Treasurer (Typed or printed name and capacity of person signing application)

SECRETARY OF STATE





## CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, Barbara K. Cegavske, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada. Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, REGENT LEAF, INC., as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since October 18, 2018, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on January 24, 2019.

Barbara K. Cegavske Secretary of State

pulma K. Cegarste

Electronic Certificate
Certificate Number: C20190124-2845