

# FR00001583

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

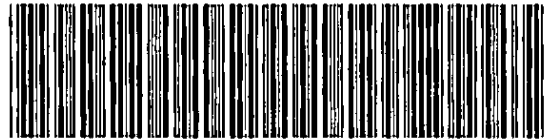
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



800326012648

03/14/19--01023--024 \*\*1105.00

FILED  
2019 MAR 28 P 3:12  
TALLAHASSEE, FLORIDA

4/1/19 Q.S.



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 25, 2019

SCOTT M PRICE, ESQ  
225 E ROBINSON ST, SUITE 600  
ORLANDO, FL 32801

SUBJECT: HACOLL CANADA, INC.  
Ref. Number: W19000029528

We have received your document for HACOLL CANADA, INC. and your check(s) totaling \$1105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days of your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Scott  
Regulatory Specialist II

Letter Number: 719A00005886

FILED

MAR 26 PM 3:12  
CLERK OF THE COURT  
JUDICIAL CIRCUIT IN AND FOR  
THE NINTH JUDICIAL CIRCUIT  
TALLAHASSEE, FLORIDA

2019 MAR 26 PM 3:12  
CLERK OF THE COURT  
JUDICIAL CIRCUIT IN AND FOR  
THE NINTH JUDICIAL CIRCUIT  
TALLAHASSEE, FLORIDA

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

HACOLL CANADA, INC., a Canadian corporation

**SUBJECT:** \_\_\_\_\_  
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:  
Scott M. Price, Esquire

\_\_\_\_\_  
Name of Person  
Mateer & Harbert, P.A.

\_\_\_\_\_  
Firm/Company  
225 E. Robinson Street, Suite 600

\_\_\_\_\_  
Address  
Orlando, FL 32801

\_\_\_\_\_  
City/State and Zip code  
dynatem@gmail.com

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

For further information concerning this matter, please call:

Kelly Diaz                      407                      377-6151  
\_\_\_\_\_  
Name of Person                      at (                      )                      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

**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.*

HACOLL CANDA, INC.

1. \_\_\_\_\_  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
2. \_\_\_\_\_ 3. \_\_\_\_\_  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. April 17, 2007 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. 274 BATES ROAD, MONT-ROYAL, QUEBEC H3S 1A3 CANADA  
(Principal office address)

\_\_\_\_\_  
(Current mailing address, if different)

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

Name: LOUIS COLA

Office Address: 16047 COLLINS AVENUE, #2103

SUNNY ISLES BEACH, Florida 33160  
(City) (Zip code)

**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)

Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to  
Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction  
of the law of which it is incorporated.

FILED  
2019 MAR 28 PM 12  
TALLAHASSEE, FLORIDA

11. Names and business addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: PHILIP COLA

~~Vice Chairman:~~ \_\_\_\_\_

274 BATES ROAD

Address: \_\_\_\_\_

MONT-ROYAL, QUEBEC H3S 1A3 CANADA

LOUIS COLA

Director: \_\_\_\_\_

274 BATES ROAD

Address: \_\_\_\_\_

MONT-ROYAL, QUEBEC H3S 1A3 CANADA

JACK COLA

Director: \_\_\_\_\_

274 BATES ROAD

Address: \_\_\_\_\_

MONT-ROYAL, QUEBEC H3S 1A3 CANADA

**B. OFFICERS**

GEORGE HASSAN

President: \_\_\_\_\_

247 BATES ROAD

Address: \_\_\_\_\_

MONT-ROYAL, QUEBEC H3S 1A3 CANADA

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: \_\_\_\_\_

Address: \_\_\_\_\_

GEORGE HASSAN

Treasurer: \_\_\_\_\_

274 BATES ROAD, MONT-ROYAL, QUEBEC H3S 1A3 CANADA

Address: \_\_\_\_\_

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

2. \_\_\_\_\_

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.

George Hassan, President

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

FILED  
2019 MAR 28 12:12  
U.S. DEPT. OF STATE  
MONTREAL, QUEBEC



## Certificate of Existence

*Canada Business Corporations Act*  
s. 263.1(1)(c)

## Certificat d'existence

*Loi canadienne sur les sociétés par actions*  
art. 263.1(1)

Hacoll Canada Inc.

Corporate name / Dénomination sociale

675513-5

Corporation number / Numéro de société

I HEREBY CERTIFY that the corporation  
named above was in existence under the  
*Canada Business Corporations Act* on 2019-  
02-27 (YYYY-MM-DD).

JE CERTIFIE, par la présente, que la société  
ci-dessus mentionnée existait en vertu de la  
*Loi canadienne sur les sociétés par actions*  
le 2019-02-27 (AAAA-MM-JJ).

*R. Edwards*

Raymond Edwards

Director / Directeur

2019-02-27

Issuance date (YYYY-MM-DD)  
Date d'émission (AAAA-MM-JJ)

SECH  
ITALIA

2019 MAR 29 P 10:12

FILED