(F	Requestors	s Name)	
(4)	(ddress)		
(A	(ddress)		
(0	ity/State/Z	ip/Phone	#)
PICK-UP	□ v	VAIT	MAIL
	Business E	ntine No.	
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Office Use Only



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# CORPECTED L CORPECTED L PLEASE WAY VENT V FLORIDA DEPARTMENT OF STATE **Division of Corporations**

July 25, 2019

CT

SUBJECT: ACCUTRAC CAPITAL SOLUTIONS INC.

Ref. Number: W19000067848

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

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

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

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

Brooke N Kinsev Regulatory Specialist II

. Letter Number: 919A00015127

#### **CT CORP**

#### 3458 Lakeshore Drive, Tallahassee, FL 32312 850-656-4724

D	ate: 7/24/2019
	Acc#120160000072
Name:	ACCUTRAC CAPITAL SOLUTIONS INC.
Document #:	
Order #:	11979081
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing:	
Apostille/Notarial Certification:	Country of Destination:  Number of Certs:
Filing: 🚺	Certified:  Plain:  COGS:
Availability  Document  Examiner  Updater  Verifier  W.P. Verifier  Ref#	Amount: \$ 78.75

Thank you!

#### COVER LETTER

	ion Section of Corporations				
SUBJECT:	Accutrac	capital.	Salutions 1	lnc	
	Name	of corporation - m	ust include suffix		<del>-</del>
Dear Sir or Made	ım:				
"Certificate of E	pplication by Foreign C xistence," or "Certificat I foreign corporation to	e of Good Standin	g" and check are sub	t Business in Florida mitted to register the	ι,'
Please return all	correspondence concer	ning this matter to	the following:		
	CIIS	Neely	son		
		Name of Per	son		
	(Flobal	Mercha Firm/Compar	nt Fund		
70807	Biscayne E	Blvcl #203	\$		<u></u>
_ Avent	ura FL, 3	3180 City/State and 2	Zip code		
cheely	eglobal Me E-mail addre			notification)	2010
For further infor	mation concerning this	matter, please call		Post	2 1
Cris Name o	Heely Person	at ( <u>30<b>5</b></u> ) Area Code	356 808 Daytime Telepl	hone Numberns	H 9:1-
				•	7
Registra Divisior Clifton	T/COURIER ADDRE	SS:	MAILING A Registration S Division of Co P.O. Box 6327 Tallahassee, F	ection orporations 7	
	recutive Center Circle ssee, FL 32301		rananassee, r	1, 32314	
Enclosed is a ch	eck for the following at	nount:			
□ \$70.00 Filing	g Fee 💢 S78.75 Fili Certificate		78.75 Filing Fee & Certified Copy	S87.50 Filing I Certificate of Certified Copy	Status &

### 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	rac Capita	INCORPORATED,"	"COMPANY,"	"CORPORATION	J."	<del></del>
"Inc.," "Co.," "Co	rp," "Inc," "Co," or "Cor	p.")				
(If name unavailab	ale in Florida, enter alter	nate corporate name a	dopted for the p	urpose of transacting	g business in Fl	orida)
2. Ontaci (State or country	o, Canada under the law of which	3	<del> </del>	(FEI number, if ap	plicable)	
4. <u>05/2</u> (Date)	2 /2007 of incorporation)	5.	(Date	of duration, if other	than perpetual)	<del></del>
6. <u>Februa</u>	(Date first (SEE SECTION	7 transacted business in S 607.1501 & 607.150			ty)	<del></del>
7. 70807	Bis cayne					<u>0</u>
	<u>,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	(Current mailing	g address, if diff	Terent)	<u> </u>	
8. Name and stree	t address of Florida re	gistered agent: (P.O	. Box <u>NOT</u> ac	cceptable)		2019
Name:	6-MF EXITED	PRISES USA,	INC.		•	
Office Address:	20807 Bisc	MYNE BIVE	<u> 20</u> 3			± ± ±
	AVENTURA	Lity)	, Florida	<i>93180</i> (Zip code)	) (74) 1711 1771 1771	AM 9: 47
designated in this further agree to co	nt's acceptance: ed as registered agent application, I hereby omply with the provisi amiliar with and acce GMF EMTER (A	accept the appointn ons of all statutes r ot the obligations of	tent as registe clative to the p I my position o	red agent and agr proper and comple	ed corporation ree to act in th ate performan	at the place iis capacity.
Cr	R's NEE/4	in (Registered a	gent's signature	NECTOR		

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: Charles. Sheppard
Address: 20807 Biscayne Blvd # 203, Aventura FL, 33180
Vice Chairman: Kenneth Goldon Judd
Address: 70807 BISCAUNE Blvd #208, Aventura FL, 33180
Director: Steve McDonald
Address: 20807 BISCAUPE Blud # 203, Aventura FC 33180
Director: <u>C(15</u> <u>Neely</u> and <u>Jonathan</u> Staeble(
Address: 20907 Biscayne Blud H203, Aventura FC, 33170
B. OFFICERS  President:
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
12.
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. CR'S NOT LY D'RECTOR (Typed or printed name and capacity of person signing application)
Clysted or printed name and capacity of nerson signific application)

Request ID: Demande n° : 023358416

Demande n° : Transaction ID: 72474357

Transaction n° : Category ID: C° Catégorie : Province of Ontario Province de l'Ontario Ministry of Government Services Ministère des Services gouvernementaux Date Report Produced: 2019/07/18 Document produit le :

Time Report Produced: 16:57:19

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

#### ACCUTRAC CAPITAL SOLUTIONS INC.

Ontario Corporation Number

Numéro matricule de la société (Ontario)

001735522

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

MAY 22 MAI, 2007

and has not been dissolved.

et n'est pas dissoute.

Dated

Fait le

JULY 18 JUILLET, 2019

Director

Saebaw Dachitt

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.