

F19000004652

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

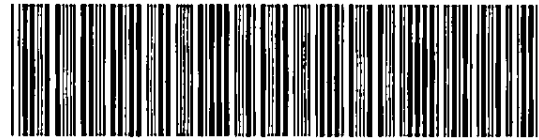
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MEDIGOLD INNOVATIONS 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:

WALLACE J. WEYLIE

Name of Person

WALLACE J.D. WEYLIE LAW OFFICE

Firm/Company

350 GULF BLVD

Address

INDIAN ROCKS BEACH, FL 33785

City/State and Zip code

wwylie@aol.com

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

For further information concerning this matter, please call:

at (727) 596-7678

Certificate of Status needed. ✓

**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. MEDIGOLD INNOVATIONS INC.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. ONTARIO CANADA 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. MARCH 2, 2012 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)

6. N/A
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 150 LESMILL RD. TORONTO, ONTARIO M3B 2T5 CANADA
(Principal office address)

(Current mailing address, if different)

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

Name: WALLACE J. WEYNE

Office Address: 350 GOLF BLVD

INDIAN ROCKS BEACH Florida 33745
(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.

Wallace J. Wayne
(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:

A. DIRECTORS

Chairman: J. ROSS QUIGLEY ✓

Address: 21 LEGACY COURT
TORONTO. ONT. M2L2Y7

Vice Chairman: OR 180 LESMILL RD

Address: TORONTO ONT. M3B2T5

Director: PATRICIA QUIGLEY ✓

Address: 21 LEGACY COURT
TORONTO ONT. M2L2Y7

Director: J. ROSS QUIGLEY ✓

Address: 21 LEGACY COURT
TORONTO ONT. M2L2Y7

B. OFFICERS

President: PATRICIA QUIGLEY ✓

Address: 21 LEGACY COURT
TORONTO. ONT. M2L2Y7

Vice President: CHRISTOPHER DAVIDGE ✓

Address: 180 LESMILL RD
TORONTO ONT. M3B2T5

Secretary: SAMUEL QUIGLEY ✓

Address: 180 LESMILL RD TORONTO ONT. M3B2T5

Treasurer: PATRICIA QUIGLEY ✓

Address: 21 LEGACY COURT TORONTO ONT M2L2Y7

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

12. Patricia Quigley
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. PATRICIA QUIGLEY, PRESIDENT MEDIGOLD INNOVATIONS
(Typed or printed name and capacity of person signing application) INC.

Request ID: .023372920
Demande n° :
Transaction ID: 72510401
Transaction n° :
Category ID: CT
Catégorie :

Province of Ontario
Province de l'Ontario
Ministry of Government Services
Ministère des Services gouvernementaux

Date Report Produced: 2019/07/23
Document produit le :
Time Report Produced: 11:30:40
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

M E D I G O L D I N N O V A T I O N S I N C .

Ontario Corporation Number

Numéro matricule de la société (Ontario)

0 0 2 3 1 9 1 0 3

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

M A R C H 0 2 M A R S , 2 0 1 2

and has not been dissolved.

et n'est pas dissoute.

Dated

Fait le

J U L Y 2 3 J U I L L E T , 2 0 1 9



Director
Directeur