Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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| 10.     | Division of Corporations<br>Fax Number : (850)617-6383   |   |                     | A Oi                 |
| From:   |  | - 6V675H                                    |                     |                      |
|         | Account Name : C T CORPORATION Account Number : FCA000000023   | SYSIEM                                      |                     |                      |
|         | MCCORFF MIRRORL - FCWDDDDDDDDDD  |   |                     |                      |
| an      | Phone : (614)280-3338 Fax Number : (954)208-0845  the email address for this business report mailings. Enter only of the address:  | ss entity to<br>ne email addr               | be used fress pleas | or futui<br>se.**    |
| an      | Phone : (614)280-3338 Fax Number : (954)208-0845  the email address for this busines nual report mailings. Enter only o  | ne email addr                               | ress pleas          | se.**                |
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| an      | Phone : (614)280-3338 Fax Number : (954)208-0845  the email address for this busines nual report mailings. Enter only of ail Address:  FOREIGN PROFIT/NONPRO  2214911 Alberts  Certificate of Status | FIT CORPO                                   | DRATIC              | se.**                |

Corporate Filing Menu

Help

Electronic Filing Menu

## To: Page 3 of 5

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

| IN COMPLIANC                         | E WITH SECTION 607.1503<br>DREIGN CORPORATION TO                   | , FLORIDA STATO                               | JTES, THE FOLLOWING IS<br>NESS IN THE STATE OF FL             | SUBMITTED TO               |
|--------------------------------------|--|---|---|----------------------------|
| 22149i1 Alber                        | и.С.С  | TOMSACT BUSI                                  | ness in the state of Fl.                                      | ОКІОЛ.                     |
| 1                                    |  |   |   |                            |
| (buter name of o                     | corporation; must include "INC(<br>Corp," "Inc," "Co," or "Corp.") | ORPORATED," "Co                               | OMPANY," "CORPORATION.  | 77,                        |
| 2214911 Alb                          |  |   |   | 19 OC:                     |
| (If name unavail                     | lable in Florida, enter alternate of                               | corporate nume adopt                          | ed for the purpose of transacting                             | husiness in Fine day       |
| Alberta, Canada                      | n e  |   |   | S ( ) S                    |
| 2.                                   |  | 3   |   | mo - 111                   |
| (State of count)                     | ry under the law of which it is in                                 | icorporated)                                  | (FEI number, if appl  | licable))                  |
| (Date                                | e of incorporation)  | 5,  | (Date of duration, if other th                                | <u> </u>                   |
| (24)                                 | or meraporation)   |   | (Date of dumnon, if other tr                                  | ian perperuai)             |
| 6                                    | ·  |   |   |                            |
| 7                                    | et Aurora, Ontario Canada L4G                                      | (Puncipal off                                 | ice address)  |                            |
|                                      |  |   | con if different  | ********                   |
|                                      |  | (Curem maining and                            | ress, it different)   |                            |
| 8. Name and <u>stree</u>             | et address of Florida registere                                    | ed agent: (P.O. Bo                            | x NOT acceptable)   |                            |
| Name;                                | C T Corporation System   |   |   |                            |
| Office Address:                      | 1200 South Pine Island Road  |   |   |                            |
|                                      | Plantation,  |   | 33324<br>, Florida  |                            |
|                                      | (City)   |   | (Zip code)  |                            |
| 9. Registered ago                    | ent's acceptance;  |   |   |                            |
| Having been nam                      | ed as registered agent and to                                      | o accept service of                           | process for the above stated                                  | corporation at the place   |
| designated in this                   | application, I hereby accept                                       | the appointment i                             | is registered agent and agree                                 | to act in this canacity. I |
| further agree to eduties, and I am f | omply with the provisions of<br>amiliar with and accept the        | full statutes relative<br>obligations of my p | e to the proper and complete<br>position as registered agent. | performance of my          |
|                                      | C T Co.  | rporation System                              |   |                            |
| Ву                                   | 121 %  |   | Mike Jones Asst. Secy   | <b>.</b>                   |
|                                      |  | (Registered agent's                           | signature)  | <del></del>                |

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.

| II. Nai                          | nes and business addresses of officers and/or directors;   |  |
|----------------------------------|--|--|
| A. DIR                           | ECTORS  Belinda Stronach   |  |
| Chairma                          | n:   |  |
|                                  | 455 Magna Drive Auroni, Ontario Canada L4G 7A9   |  |
| Accress:                         |  |  |
| Vice Cha                         | iman:  | <u> </u>   |
|                                  |  | ALLU C   |
|                                  |  | 至二   |
| <b>T</b> .:                      | Belinda Stronach 🗸   | in the   |
| Director:                        | 455 Magna Drive Aurora, Ontairo Canada L4G 7A9   | - 17   |
| Address:                         |  |  |
|                                  |  |  |
|                                  | Colin Chapin   | - On:  |
| Director:                        |  |  |
| Address:                         | 455 Magna Drive Autora, Ontario Canada L4G 7A9   |  |
|                                  | ICERS Belinda Stronach 455 Magna Drive, Autora, Ontairo Canada L4G 7A9   |  |
|                                  | ident:   |  |
| Secretary:                       | Circo Harnish 📝  |  |
| Address:                         | 455 Magna Drive, Aurora Onturio Canada I 4G 7A9  |  |
|                                  | Colin Chapin ✓   |  |
| Treasurer:                       | 455 Magna Drive, Aurora Ontario Canada L4G 7A9   |  |
|                                  | - S Pringial Divis, Autor, Catalog Canada Life (A)   |  |
| NOTE:                            | If necessary, you may attach an addendum to the application listing additional officers  | and/or directors.                                      |
| 12. 🧠                            |  |  |
| are true a<br>a third de<br>Greg | Signature of Director or Officer or or director signing this document (and who is fisted in number 11 above) affirms the notate that he or she is aware that false information submitted in a document to the Depart gree felony as provided for in s.817.155, F.S.  Hamish, Secretary | ut the facts stated herein timent of State constitutes |
|                                  | (Typed or printed name and capacity of person signing application)   |  |

Government of Alberta ■

Corporate Access Number

2022149112 [

CERTIFICATE OF STATU

Form 32

1 CERTIFY THAT ACCORDING TO THE OFFICIAL RECORDS OF THE CORPORATE REGISTRY

2214911 ALBERTA ULC INCORPORATED IN ALBERTA ON 2019/09/04 IS AS OF THIS DATE A VALID AND SUBSISTING CORPORATION.

GIVEN UNDER MY SEAL OF OFFICE IN THE PROVINCE OF ALBERTA.

DATED: 2019/10/18

