# F200000159

(	Requestor's Name)			
(	Address)			
	Address)			
(1	City/State/Zip/Phone #)			
PICK-UP	MAIL MAIL			
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates of Status			
Special Instructions to Filing Officer:				

Office Use Only



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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: accounting@incserv.com

#### **ORDER FORM**

**FROM** 

TO Florida Department of State
The Centre of Tallahassee
2415 North Monroe Street, Suite 810
Tallahassee, FL 32303
corphelp@dos.myflorida.com

Melissa Stops mstops@incserv.com 850.656.7953

REQUEST DATE 2/11/2020

850-245-6051

**PRIORITY** Routine

OUR REF # (Order ID#) 806179

**ORDER ENTITY** 

5021771 ONTARIO INC.

## PLEASE PERFORM THE FOLLOWING SERVICES:

5021771 ONTARIO INC. (FL)

File the attached foreign qualification document

CECTARY OF STATE LAHASSEE, FLORID

NOTES:

\$70.00 Authorized

Email address for annual report reminders: chris.w.cullen@gmail.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.

Tuesday, February 11, 2020 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.

1. 5021771 ONT	ARIO INC.			
	orporation; must include "INCORPORATED," 'orp," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATION,"		
(If name unavaile	able in Florida, enter alternate corporate name ad	opted for the purpose of transacting bu	siness in Florida)	
2. CANADA	3. <u>9</u>	8-1513283	<del></del>	
(State or country under the law of which it is incorporated) (FEI number, if app			able)	
4. SEPTEMBER 1	3, 2019 5.			
(Date	of incorporation)	(Date of duration, if other than	perpetual)	
6. JANUARY 30,	2020		7 2	
	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1502		DZO FEI	
7. 15530 BATHURST ST., KING CITY, ON L7B 1K5 CANADA				
	(Principal office		<u> </u>	
	(Current mailing	address, if different)	PH 4: 47  GF BTALE E. F ORID	
8. Name and stree	et address of Florida registered agent: (P.O.)	Box NOT acceptable)		
Name:	INCORPORATING SERVICES, LTD.	<del></del>		
Office Address:	1540 GLENWAY DRIVE	<u> </u>		
	TALLAHASSEE	. Florida 32301		
	(City)	, Florida <u>32301</u> (Zip code)		
9. Registered ago	ent's acceptance:			
	ed as registered agent and to accept service	of process for the above stated co	rporation at the place	
designated in this	application, I hereby accept the appointme	nt as registered agent and agree to	act in this capacity. I	
	omply with the provisions of all statutes reli		erformance of my duties	
and I am Jamuiar	with and accept the obligations of my posit	tion as registered agent.		
(	_			

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.

#### A. DIRECTORS □ Chairman Name: PETER CULLEN ☐ Chairman □Vice Chairman Address: 15530 BATHURST ST. ☐Vice Chairman Address: \_\_\_\_\_ KING CITY, ON L7B 1K5 □ Director Director CANADA X President □ President □ Vice President ☐ Vice President ☐ Secretary ☐Treasurer Treasurer ☐ Secretary Other \_\_\_\_ ☐ Other \_\_\_\_\_ □Other \_\_\_\_\_ ☐ Other \_\_\_\_\_ □ Chairman Chairman Name: \_\_\_\_\_\_ Name: □ Vice Chairman Address: ☐ Vice Chairman Address: Director Director 11 President ☐ President 38.7 1.88 □Vice President \_\_\_ ☐ Vice President ☐ Treasurer ☐ Secretary Treasurer □ Secretary □Other \_\_\_\_\_ ☐ Other \_\_\_\_\_ □Other ☐Other \_\_\_\_ Chairman Name: \_\_\_\_\_ ☐ Chairman Name: \_\_\_\_\_ □Vice Chairman Address: \_\_\_\_\_\_\_ ☐Vice Chairman Address: Director Director ☐ President ☐ President ) □ Vice President \_\_\_\_\_ ☐Vice President ☐ Secretary ☐Treasurer ☐ Secretary □Treasurer Other \_\_\_\_ □ Other \_\_\_\_\_ □Other \_\_\_\_\_ Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form. 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

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 o 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. PETER CULLEN, PRESIDENT

Request ID: Demande n\*:

024179015

Transaction ID: 74563888 Transaction n\*:

Category ID: Categorie:

CT

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

Date Report Produced: 2020/02/06 Document produit le : Time Report Produced: 13:54:58 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

5021771 ONTARIO INC.

Ontario Corporation Number

Numéro matricule de la société (Ontario)

005021771

SEPTEMBER 13 SEPTEMBRE,

is a corporation incorporated, amalgamated or continued under the laws of the Province of Ontario.

The corporation came into existence on

est une société constituée, prorogée ou née d'une fusion aux termes destiois de la Province de l'Ontario.

La société a été fondée le

and has not been dissolved.

et n'est pas dissoute.

Saebara Dachitt

Dated

Fait le

FEBRUARY 06 FÉVRIER, 2020

Director Directeur

The issuance of this certificate in electronic form is authorized by the Director of Companies and Personal Property Security Branch.

La délivrance du présent certificat sous forms électronique est autorisée par la Directrice de la Direction des compagnies et des sûretés mobillères.