

F20000001484

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

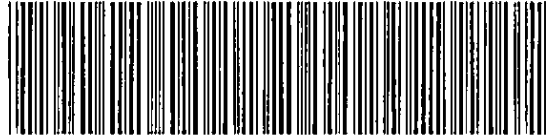
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W20000028924

Office Use Only



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SBF
3/23/20

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312

(850) 656-4724

DATE 03/18/2020

****WALK IN****

ENTITY NAME EBENISTERIE CLASSIQUE INC.

DOCUMENT NUMBER _____

****PLEASE FILE THE ATTACHED AND RETURN****

XXXX

Plain Copy

Certified Copy

Certificate of Status

****PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY****

Certified Copy of Arts & Amendments

Certificate of Good Standing

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****APOSTILLE / NOTARIAL CERTIFICATION****

COUNTRY OF DESTINATION _____

NUMBER OF CERTIFICATES REQUESTED _____

TOTAL OWED \$78.75

ACCOUNT #: I20160000072

E R J

Please call Tina at the above number for any issues or concerns. Thank you so much!

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: EBENISTERIE CLASSIQUE 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:

CHELSEY T. LESTER, ESQ.

Name of Person

LEMERY GREISLER LLC

Firm/Company

60 RAILROAD PLACE, SUITE 502

Address

SARATOGA SPRINGS, NY 12866

City/State and Zip code

CLESTER@LEMERYGREISLER.COM

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

For further information concerning this matter, please call:

CHELSEY T. LESTER, ESQ.

at (518) 581-8800

Name of Person

Area Code

Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$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

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**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. EBENISTERIE CLASSIQUE INC.

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

CLASSIC WOODWORK

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

2. QUEBEC, CANADA

(State or country under the law of which it is incorporated)

3. 98-0623478

(FEI number, if applicable)

4. AUGUST 30, 2001

(Date of incorporation)

5. _____

(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. 1 ST. ALPHONSE STREET, SAINTE-THERESE, QUEBEC, QC J7E 1G3, CANADA

(Principal office street address)

(Current mailing address, if different)

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

Name: UNITED CORPORATE SERVICES, INC.

Office Address: 9200 SOUTH DADELAND BLVD STE 508

MIAMI

(City)

, Florida 33156

(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.

Michael A Barr, President

(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. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS

☐ Chairman Name: GUY GINGRAS
☐ Vice Chairman Address: 1 ST. ALPHONSE STREET
☐ Director SAINTE-THERESE
☒ President QUEBEC, QC J7E 1G3 CANADA
☐ Vice President _____
☐ Secretary ☐ Treasurer
☒ Other CEO ☐ Other _____

☐ Chairman Name: CHANTAL RIVEST
☐ Vice Chairman Address: 1 ST. ALPHONSE STREET
☐ Director SAINTE-THERESE
☐ President QUEBEC, QC J7E 1G3 CANADA
☐ Vice President _____
☒ Secretary ☒ Treasurer
☒ Other CFO ☐ Other _____

☐ Chairman Name: _____
☐ Vice Chairman Address: _____
☐ Director _____
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

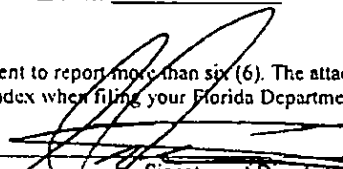
☐ Chairman Name: _____
☐ Vice Chairman Address: _____
☐ Director _____
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: _____
☐ Vice Chairman Address: _____
☐ Director _____
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: _____
☐ Vice Chairman Address: _____
☐ Director _____
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

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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.

12.  _____
 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. GUY GINGRAS, PRESIDENT AND CHIEF EXECUTIVE OFFICER
 (Typed or printed name and capacity of person signing application)

Certificate of Certification

Law regarding the Legal Registration of Businesses (RLRQ (Collect. of Laws and
Reg. of Quebec), Chapter P-44.1)

I attest that the business bearing the name

ÉBÉNISTERIE CLASSIQUE INC.

- is registered since August 30, 2001.
- is not in default of filing an annual update statement.
- is not in default of complying with a request that was made to it by virtue of article 73.
- is not in the process of dissolution.
- is not disbarred.

Certification Number: 588973404

The certification number above allows you to check this certified document at any time with the
help of the online service to Verify a Trade Registrar certification number.

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Done on January 16, 2020, for Quebec
business number 1160298585.

[Signature]
Trade Registrar



Quebec Services



CERTIFIED TRANSLATION

French To English

Case# 31330

Translation Certification:

January 22, 2020

I, Bradley Schon, hereby certify that the enclosed translation from French to English has been translated by a qualified translator, to the best of my ability, it is a true and correct translation. I further certify that the translator is competent in both languages and is qualified to render such a translation.

Bradley Schon
Operations Manager

AmeriLing, LLC
1270 Avenue of the Americas, FLR7
New York, NY 10020

2020 MAR 18 AM 10:59



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 19, 2020

SUNSHINE STATE CORPORATE COMPLIANCE COMPANY

SUBJECT: EBENISTERIE CLASSIQUE INC.
Ref. Number: W20000028924

CORRECTED
Please Allow For
Same File Date

We have received your document for EBENISTERIE CLASSIQUE INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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.

Sharon D Franklin
Regulatory Specialist II

Letter Number: 020A00006002

*Please return
Cert copy*

RECEIVED
2020 MAR 20 PM 3:11
DIVISION OF STATE
CORPORATIONS
FLORIDA