## F200003299

(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:					





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2020 J -- 6 F1 9: 29

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 334564 8196194

AUTHORIZATION : Smell de man

COST LIMIT : \$ 70.00

ORDER DATE: June 24, 2020

ORDER TIME : 12:42 PM

ORDER NO. : 334564-005

CUSTOMER NO: 8196194

## FOREIGN FILINGS

NAME: HIRED RESOURCES LTD., INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Robinson -- EXT# 62980

EXAMINER:



July 7, 2020

CSC

RESUBMIT

Please give original submission date as file date.

SUBJECT: HIRED RESOURCES LTD.

Ref. Number: W20000069433

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

The use of LIMITED or LTD. is not sufficient as a corporate designation. The name must include a word such as INCORPORATED, INC., CORPORATION or CORP.

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) 245-6052.

Tacarri K Glass Regulatory Specialist II

www.sunbiz.org

Letter Number: 820A00013159



July 21, 2020

CSC

SUBJECT: HIRED RESOURCES LTD.

Ref. Number: W20000069433

Please give original submission date as file date.

We have received your document for HIRED RESOURCES LTD. and the authorization to debit your account in the amount of \$70.00. However, the document has not been filed and is being returned for the following:

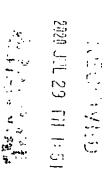
The business principal/street address must be included in the document.

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) 245-6050.

Rebekah White Regulatory Specialist II Supervisor

Letter Number: 820A00013684



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

	HIGN CORPOR (HON 10-1 FIGN CORPOR (HON 10-1					
clinter name of co	ed Rescurses of open the control of the control of the control of the control of the control open the contro	/c/. Inc.	МРАЧУ," СОВРОВАТ	(BON)		
(It name unavada	ble in Horida, enter alternate cor	porate name adopte	d for the purpose of transa	icting busir	iess in Florida)	
	nC(4					
4 September (Date)	of incorporation)	5	(Date of duration, if of	 her than pe	rpetual)	
()			da, if prior to registration) S., to determine penalty ha	ibility)		
7,2400 -	2440 Dundas	5 St. W.	otronoT.	, DN	MUP	w9
	(	Principal office stre	et address)	.,		
<del> </del>		Current mailing addr	and if differently		_	
	(C	unem manng adar	ess, it unicicity		23	
8. Name and street	t address of Florida registered	agent: (P.O. Box	NOT acceptable)		, in (2)	
Name:	Corporation Service Company	,				
Office Address:	1201 Hays Street				<i>ور</i> 1	
Villee Address.	Tallahassee		32301		79119 1 10 11 1	,
	(City)	·	Florida 32301 (Zip code)		કં	
9. Registered age	nt's accontance				39	
Having been name designated in this further agree to co	ed as registered agent and to a application, I hereby accept to amply with the provisions of a with and accept the obligation	he appointment a Il statutes relative	s registered agent and a to the proper and comp	igree to ac plete perfo	t in this capacit france of my i	y. 1
Co <u>B</u> y	orporation Service Compan y: ,	y la Est red agent's signatus	Quio	<u>~</u>	<b>Amanda Ro</b> Asst. Vice Pi	
the Department of	ertificate of existence duly au State, by the Secretary of State hich it is incorporated.	thenticated, not me e or other official	ore than 90 days prior to having custody of corpo	o delivery orate recor	of this applications of the same of the sa	on to tion

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	some Typen Hildrell	t hairm <del>ian</del>	*******			
Vice Chamian	Address 1971 /our Jaiseus Co	The Chairman	Notice 286 Raintew talis			
Durctor	Burnleyton, cal (11,212	Durene	Chestamere, MB			
President	J.	President	11x 1W5			
Vice President		Wice President				
*Secretary	Licamirer	Secretary	Treasurer			
. "Other	Other	.( Mher	(Rhet			
`Chairman	Name	^^Charman	Name			
Vice Chairman	Address:	□Vice Chairman	Address			
Director		□Director				
President		President				
□Vice President	<del></del>	□Vice President				
□ Secretary	☐Treasurer	☐Secretary:	☐ Freasurer			
□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.						
12. Signature of Director or Office						
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. Tyson Mitchell Director (Typed or printed name and capacity of person signing application)						

## **Certificate of Compliance**

Certificat de conformité

Canada Business Corporations Act s. 263.1 Loi canadienne sur les sociétés par actions art. 263.1

Hired Resources Ltd.

Corporate name / Dénomination sociale

796691-1

Corporation number / Numéro de société

I HEREBY CERTIFY that the corporation named above:

- exists under the Canada Business Corporations Act;
- · has filed the required annual returns; and
- · has paid all prescribed fees required.

JE CERTIFIE, par la présente, que la société cidessus mentionnée :

- existe en vertu de la *Loi canadienne sur les sociétés par actions*;
- a déposé les rapports annuels exigés; et
- a acquitté les droits prescrits.

strowed A

Raymond Edwards

Director / Directeur

2020-07-02

Issuance date (YYYY-MM-DD) Date d'émission (AAAA-MM-JJ)