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September 2, 2020

ANDREW ZACCARDO 4861 RUE DE LYON LAVAL, QUEBEC CANADA H7K 0A7,

SUBJECT: 9851399 CANADA INC. Ref. Number: W20000099663

We have received your document for 9851399 CANADA INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers listed.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

Yvette Scott Document Specialist II

Letter Number: 520A00016890

OCT 0 6 2020

COVER LETTER

TO:	Registration Section			
	Division of Corporations 9851399 CANADA INC			
SHRI	ECT:	•		
3009		me of corporation	must include suffix	
Dear S	Sir or Madam:			
"Certif	iclosed "Application by Foreign ficate of Existence," or "Certificate referenced foreign corporation	cate of Good Stand	ing" and check are subm	
	return all correspondence conc EW ZACCARDO	eeming this matter	o the following:	•
		Name of P	erson	
985139	99 CANADA INC.			
		Firm/Comp	nany	
4861 F	RUE DE LYON		,	
	 	Addres	is	
LAVA	L,QUEBEC,CANADA H7K 0A7			
-		City/State an	d Zip code	
a_zacc	ardo@hotmail.com			
	E-mail ado	lress: (to be used for	r future annual report no	tification)
For fu	rther information concerning th	is matter, please ca	II:	
ANDREW ZACCARDO 514 513-39			513-3948	
		at ()	
	Name of Person	Area Code	Daytime Telepho	one 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 Tallahassec, FL 32314		
Please		A DEPARTMENT	OF STATE \$78.75 Filing Fee & Certified Copy	■ \$87.50 Filing Fee, Certificate of Status of Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACI **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. 9851399 CANADA INC. 1. (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) CANADA 3. (FEI number, if applicable) (State or country under the law of which it is incorporated) (Date of duration, if other than perpetual) AUG 4th, 2016 (Date of incorporation) JULY 16th, 2020 (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 1521 NE 17TH TER FT. LAUDERDALE FL 33304 (Principal office street address) 4861 RUE DE LYON LAVAL,QC,CANADA H7K 0A7 (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) ANDREW PETERSEN Name: 16 FORT ROYAL ISLE Office Address: FT. LAUDERDALE (City) 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.

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.

-	Signature of Dir	ector or Officer	
ndividuals may be	Use an attachment to report more than six (6). To added to the index when filing your Florida De	partment of State Annual Report for	m.
]Other	□Other	□Other	□Other
3Secretary	□Treasurer .	□Secretary	Treasurer
□Vice President		□Vice President	
]President			
Director		Director	
□Vice Chairman	Address:	□Vice Chairman Addre	ss:
]Chairman	Name:	□Chairman Name:	
JOHEN			٠
Other		☐Other	
Secretary	□ Treasurer	□ Secretary	☐Treasurer
President			
			· · · · · · · · · · · · · · · · · · ·
	Address:		
Chairman	Name:		is:
]Other	Other	□Other	Other
Secretary	☐Treasurer	☐ Secretary	☐Treasurer
Vice President	THE WAY	□Vice President	
IPresident	H7K 0A7	□President	
Director	CANADA	□Director	
Vice Chairman		□Vice Chainnan Addres	s:
lChairman	Name:	□Chairman Name:	

(Typed or printed name and capacity of person signing application)

ANDREW ZACCARDO

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Certificat d'existence

Canada Business Corporations Act s. 263.1(1)(c)

Loi canadienne sur les sociétés par actions art. 263.1(1)

9851399 CANADA INC.	
 Corporate name / Dénomination sociale	
985139-9	
 Corporation number / Numéro de société	-

I HEREBY CERTIFY that the corporation named above was in existence under the Canada Business Corporations Act on 2016-08-02 (YYYY-MM-DD).

JE CERTIFIE, par la présente, que la société ci-dessus mentionnée existait en vertu de la Loi canadienne sur les sociétés par actions le 2016-08-02 (AAAA-MM-JJ).

strough A

Raymond Edwards

Director / Directeur 2020-09-30

Issuance date (YYYY-MM-DD) Date d'émission (AAAA-MM-JJ) ٤-