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COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: 2801732 ONTARIO E	NC.		
	Name of corporation	- must include suffix	
Dear Sir or Madam:			
The enclosed "Application by Fore "Certificate of Existence," or "Cert above referenced foreign corporation	ificate of Good Star	nding" and check are submit	Business in Florida." tted to register the
Please return all correspondence concerning this matter to the following:			221 DEC 23
Julian Franch			DEC
	Name of	Person	22
Altro LLP			-0
	Firm/Con	npany	قد بن
155 University Avenue, Suite 300			ب ت <u>ت</u>
	Addr	ess	<i>y</i>
Toronto, ON M5H 3B7			
	City/State a	ınd Zip code	
jfranch@altrolaw.com			
E-mail a	ddress: (to be used	for future annual report not	ification)
For further information concerning	this matter, please	call:	
Julian Franch	416 at (le Daytime Telephor	
Name of Person	Area Coc	le Daytime Telephor	ne Number
STREET/COURIER AD Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Su Tallahassee, FL 32303		MAILING ADI Registration Sec Division of Corp P.O. Box 6327 Tallahassee, FL	tion porations
_	IDA DEPARTMEN		■ \$87.50 Filing Fee. Certificate of Status & Certified Copy

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.

(If name unavail	able in Florida, enter alternate corporate name ad	opted for the purpose of transacting business in Flor	ida)
Ontario, Canada			
(State or countr	y under the law of which it is incorporated)	(FEI number, if applicable)	
December 18, 2	020 5	(Date of duration, if other than perpetual)	
(Date	of incorporation)	• •	
		<u> </u>	<u> </u>
	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.150)	Torida, if prior to registration) 2. F.S., to determine penalty liability)	UtC
9 PARKWOOD	AVE, TORONTO, ONTARIO, CANADA, M4V	2W9	23
	(Principal office	street address)	THE C 23 PH 3
	(Current mailing		بي
			Ū
Name and street	et address of Florida registered agent: (P.O.		Ü
Name and stree	et address of Florida registered agent: (P.O. Northwest Registered Agent LLC		ū
Name:			C
Name:	Northwest Registered Agent LLC 7901 4th St N STE 300	Box <u>NOT</u> acceptable)	10
Name:	Northwest Registered Agent LLC 7901 4th St N STE 300 St. Petersburg	Box <u>NOT</u> acceptable)	(
Name: ffice Address: Registered ag laving been nan esignated in this urther agree to c	Northwest Registered Agent LLC 7901 4th St N STE 300 St. Petersburg (City) ent's acceptance: ned as registered agent and to accept service application, I hereby accept the appointme	Box NOT acceptable) Florida \(\frac{33702}{\text{(Zip code)}} \) of process for the above stated corporation at at registered agent and agree to act in this cative to the proper and complete performance.	cape
Name: ffice Address: Registered ag aving been nan esignated in this orther agree to c	Northwest Registered Agent LLC 7901 4th St N STE 300 St. Petersburg (City) ent's acceptance: ned as registered agent and to accept service application, I hereby accept the appointme comply with the provisions of all statutes rela	Box NOT acceptable) Florida \(\frac{33702}{\text{(Zip code)}} \) of process for the above stated corporation at at registered agent and agree to act in this cative to the proper and complete performance.	cape
Name: ffice Address: Registered ag aving been nan esignated in this	Northwest Registered Agent LLC 7901 4th St N STE 300 St. Petersburg (City) ent's acceptance: ned as registered agent and to accept service application, I hereby accept the appointme comply with the provisions of all statutes rela	Box NOT acceptable) Florida \(\frac{33702}{\text{(Zip code)}} \) of process for the above stated corporation at at registered agent and agree to act in this cative to the proper and complete performance.	capa

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

under the law of which it is incorporated.

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

A. DIRECTORS Karen Foss □ Chairman □Chairman Name: 9 PARKWOOD AVE □ Vice Chairman Address: _____ □Vice Chairman Address: _ TORONT, ONTARIO □ Director Director CANADA, M4V2W9 □ President President □Vice President ☐ Vice President Treasurer □ Secretary ☐ Treasurer ■ Secretary □ Other _____ □Other _____ □Other _____ Name: □ Chairman Name: □ Chairman □Vice Chairman Address: _____ □ Vice Chairman Address: _____ □ Director □ Director □President □President □Vice President _____ ☐ Vice President ☐Treasuret**5** ☐ Treasurer □ Secretary □ Sceretary □Other _____ □Other _____ □Other _____ □ Chairman □ Chairman Name: _______ 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. /s/ Karen Foss 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. Karen Foss, President of 2801732 ONTARIO INC.

Request ID:

025449975

Demande n°:

Transaction ID: 77615526

Transaction nº: Category ID: Catégorie :

Province of Ontario Province de l'Ontario Ministry of Government Services Ministère des Services gouvernementaux Date Report Produced: 2020/12/21

Document produit le :

Time Report Produced: 14:32:25

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

2801732 ONTARIO INC.

Ontario Corporation Number

Numéro matricule de la société (Ontario

002801732

is a corporation incorporated, amalgamated or continued under the laws of the Province of Ontario. est une société constituée, prorogée ou née d'une fusion aux termes des lois de la Province de l'Ontario.

The corporation came into existence on

La société a été fondée le

DECEMBER 18 DÉCEMBRE, 2020

and has not been dissolved.

et n'est pas dissoute.

Saebaro Dachitt

Dated

Fait le

DECEMBER 21 DÉCEMBRE, 2020

Director Directeur

The issuance of this certificate in electronic form is authorized by the Ministry of Government Services. La délivrance du présent certificat sous forme électronique est autonsée par le Ministère des Services gouvernementaux.