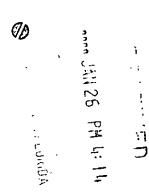
# F2100000535

(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:				

Office Use Only



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## CORPORATE ACCESS, \_

When you need ACCESS to the world

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INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

## **WALK IN**

	P	ICK UP:	01/26/2021			
	CERTIFIED COPY					
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xx	FILING	ARTIC	CLES			
l <b>.</b>	Parkland (U.S.) Per (CORPORATE NAME AND DO	eople Corp				_
	(CORPORATE NAME AND DO	OCUMENT #)				
<b>3.</b>	(CORPORATE NAME AND DO	OCUMENT #)				
·•	(CORPORATE NAME AND DO	CUMENT #)			<del></del>	
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•	(CORPORATE NAME AND DO	CUMENT #)				·
PECIAL STRUCTIONS:						
	_ _					<del>-</del>

## **COVER LETTER**

_	tration Section ion of Corporations				
SUBJECT:	Parkland (U.S.) People Corp	١,			
00202011	Name	of corporation -	must include suffix		
Dear Sir or M	adam:				
"Certificate of	"Application by Foreign Co Existence." or "Certificate ced foreign corporation to t	of Good Standi	ng" and check are sub		
Please return a	all correspondence concern	ing this matter to	the following:		
Mr. Tariq Rem	tulla				
		Name of Pe	rson		
Parkland Corpo	oration				
		Firm/Compa	nny		
Suite 1800, 240	) 4th Ave., SW				
		Address			
Calgary, AB T	2P 4H4				
		City/State and	Zip code		
pearson.tiffanio	<u></u> -				
	E-mail address	s: (to be used for	future annual report	notification)	
For further inf	ormation concerning this n	natter, please cal	1:		
Tiffanie Pearso	n	at (	903-8895		
Namo	e of Person	Area Code	Daytime Telep	hone 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		
	theck for the following amovek payable to: FLORIDA Ding Fee	EPARTMENT O g Fee & 💢 S	F STATE 178.75 Filing Fee & Certified Copy	S87.50 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.

"Inc.," "Co.," "C	orporation; must include "INCORPORATED," " orp," "Inc," "Co," or "Corp,")	COMPANY," "CORPORATION	1'	
Parkland U.S. F	eople Corp.			
(If name unavail	able in Florida, enter alternate corporate name add	pted for the purpose of transactin	g business in Florida)	
Delware	3			
(State or country	y under the law of which it is incorporated)	(FEI number, if ap	plicable)	
October 16, 201	0			
(Date	of incorporation)	(Date of duration, if other than perpetual)		
551 E. State St., .	American Fork, UT 84003 (Principal office	street address)		
551 E. State St.,	(Principal office	street address) ddress, if different)		
	(Principal office	ddress, if different)	2021 JJ	
Name and stree	(Principal office government mailing a get address of Florida registered agent: (P.O. E	ddress, if different)	2021 JAH 26	
Name and stree	(Principal office government of the Current mailing a cet address of Florida registered agent: (P.O. ECT Corporation System 1200 S. Pine Island Rd.	ddress, if different)	2021 JAN 26 AM	

### 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.

Bree Zahner - Assistant Secretary

(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.

## DocuSign Envelope ID: 61ED900B-F235-4EE7-A047-3931D6E0CF29

A. DIRECTORS			
□ Chairman <sub>.</sub>	Name:	□ Chairman	Name: Dan Dunstan
□Vice Chairman	Address: Suite 1800, 240 4th Ave.,SW	□Vice Chairman	Address: Suite 1800, 240 4th Ave.,SW
Director	Calgary, AB T2P 4H4	Director	Calgary, AB T2P 4H4
<b>■</b> President		□President	
□Vice President		□Vice President	
□Secretary	Treasurer	☐ Secretary	□Treasurer
□ Other	Other	□Other	□Other
□ Chairman □ Vice Chairman ■ Director □ President □ Vice President □ Secretary ■ Other Chief Fin	David Jardine  Name:	□ Chairman □ Vice Chairman □ Director □ President □ Vice President □ Secretary □ Chief Exc	Name:  Suite 1800, 240 4th Ave.,SW  Address:  Calgary, AB T2P 4H4   Treasurer  ecutive C  Other
□Chairman □Vice Chairman	Name: Chad Graves  Suite 1800, 240 4th Ave.,SW	□Chairman	Name: Christy Elliott  Suite 1800, 240 4th Ave.,SW  Address:
□Director	Calgary, AB T2P 4H4	□Director	Calgary, AB T2P 4H4
□President		□President	
■ Vice President		□Vice President	
□Secretary	<b>■</b> Treasurer	<b>■</b> Secretary	□Treasurer
□Other	□Other	□Other	Other
Important Notice: Usindividuals Programmes 12. Doug Ha	Use an attachment to report more than six (6). The state of the index when filing your Florida Department to the index when filing your Florida Department of Direct Direct Signature of Direct	e attachment will be imaged artment of State Annual Re stor or Officer	d for reporting purposes only. Non-indexed port form.
The officer or direct she is aware that fat s.817.155, F.S.	tor signing this document (and who is listed in nulse information submitted in a document to the Di	imber 11 above) affirms the epartment of State constitution	at the facts stated herein are true and that he or tes a third degree felony as provided for in
Doug Haugh	President	·	

#### DocuSign Envelope ID: 61ED900B-F235-4EE7-A047-3931D6E0CF29

#### A. DIRECTORS Marcel Teunissen □ Chairman ☐ Chairman Name: \_\_\_\_\_ Suite 1800, 240 4th Ave., SW □Vice Chairman Address: ☐ Vice Chairman Address: \_\_\_\_\_\_ Calgary, AB T2P 4H4 □ Director □ Director □President □President ☐ Vice President ☐ Vice President □ Secretary ☐ Treasurer ☐ Secretary ☐ Treasurer Other \_\_\_\_\_ Other \_\_\_\_\_ □Other \_\_\_\_\_ Other \_\_\_\_\_ Name: \_\_\_\_ ☐ Chairman ☐ Chairman □Vice Chairman Address: \_\_\_\_ □Vice Chairman Address: \_\_\_\_\_ Director Director □President □ President □Vice President ☐ Vice President □Secretary ☐ Treasurer ☐ Secretary ☐ Treasurer □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 individuaRomaythe widded 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. Doug Haugh

President



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "PARKLAND (U.S.) PEOPLE CORP." IS DULY

INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS

OF THIS OFFICE SHOW, AS OF THE TWENTY-FIRST DAY OF JANUARY, A.D.

2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PARKLAND (U.S.)

PEOPLE CORP." WAS INCORPORATED ON THE SIXTEENTH DAY OF OCTOBER,

A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

at corp.delaware.gov/auti

Authentication: 202334767

Date: 01-21-21

7104505 8300 SR# 20210177206