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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

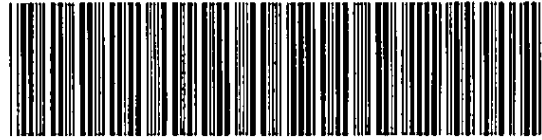
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05/05/21--01004--016 **87.50

FILED
2021 MAY -5 PM 2:02
SECRETARY OF STATE
TALLAHASSEE, FL



ALTRO
— III —
US & CANADIAN ATTORNEYS, NOTARIES
AND LEGAL COUNSEL

May 3, 2021

BY FEDEX

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

**RE: KFLIPP Inc.
Matter No. 18253-002**

We are solicitors for KFLIPP Inc., an Ontario corporation, that wishes to register a foreign corporation to transact business in the state of Florida.

Accordingly, we enclose the following:

1. Cover Letter;
2. Application by foreign corporation for authorization to transact business in Florida;
3. Certificate of status of KFLIPP Inc.; and
4. Cheque in the amount of US\$87.50 payable to Florida Department of State being the requisite filing fee (please note this cheque is drawn on a US bank and is in US funds).

As this matter is time sensitive, I am hoping that you will be able to process the enclosed as soon as possible. That said, please let me know if you require any additional information to assist with this process.

Should you have any questions, please feel free to contact me at 416-477-8165.

Thanks in advance,

ALTRO LLP

Julian Franch, B.A., M.B.A., J.D.
Associate Lawyer

JF/yt
Encl.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: KFLIPP 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:

Julian Franch

Name of Person

Altro LLP

Firm/Company

155 University Avenue, Suite 300

Address

Toronto, Ontario, M5H 3B7

City/State and Zip code

jfranch@altrolaw.com

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

For further information concerning this matter, please call:

Julian Franch

at (416) 477-8165

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

**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. KFLIPP Inc.
(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)
2. Ontario, Canada 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. March 3, 2021 5. _____
(Date of incorporation) (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. 11511 Weston Road, Vaughan, Ontario, Canada, L3L 0C2
(Principal office street address)
- _____
(Current mailing address, if different)
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
- Name: Northwest Registered Agent LLC
- Office Address: 7901 4th St N STE 300
- St. Petersburg, Florida 33702
(City) (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.

/s/ Tom Glover

(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]:

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TAMPA, FLORIDA

A. DIRECTORS

☐ Chairman Name: Michael Corno
☐ Vice Chairman Address: 11511 Weston Road,
Vaughan, Ontario, Canada, L3L 0C2
☒ Director
☒ President
☐ Vice President
☒ Secretary ☐ Treasurer
☐ Other ☐ Other

☐ Chairman Name: Lucia Corno
☐ Vice Chairman Address: 11511 Weston Road,
Vaughan, Ontario, Canada, L3L 0C2
☒ Director
☐ President
☐ Vice President
☐ Secretary ☐ Treasurer
☐ Other ☐ Other

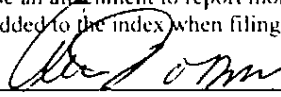
☐ Chairman Name: Peter James Pio Corno
☐ Vice Chairman Address: 11511 Weston Road,
Vaughan, Ontario, Canada, L3L 0C2
☒ Director
☐ President
☐ Vice President
☐ Secretary ☒ Treasurer
☐ Other ☐ Other

☐ 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

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. Michael Corno, President of KFLIPP Inc.
(Typed or printed name and capacity of person signing application)

Request ID: 025883619
Demande n° :
Transaction ID: 78633042
Transaction n° :
Category ID: CT
Catégorie :

Province of Ontario
Province de l'Ontario
Ministry of Government Services
Ministère des Services gouvernementaux

Date Report Produced: 2021/03/22
Document produit le :
Time Report Produced: 15:23:39
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

K F L I P P I N C .

Ontario Corporation Number

Numéro matricule de la société (Ontario)

0 0 2 8 2 0 7 9 9

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

M A R C H 0 3 M A R S , 2 0 2 1

and has not been dissolved.

et n'est pas dissoute.

Dated

Fait le

M A R C H 2 2 M A R S , 2 0 2 1



Director
Directeur