

F21000003674

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

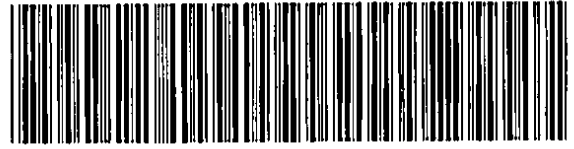
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2021 JUN 29 PM 12:00

2021 JUN 29 AM 11:03

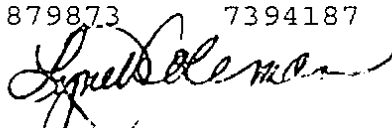
CLERK OF STATE  
TALLAHASSEE, FL

RECEIVED

FILED

Handwritten signature

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195  
REFERENCE : 879873 7394187  
AUTHORIZATION :   
COST LIMIT : \$ 70.00

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ORDER DATE : June 24, 2021

ORDER TIME : 9:13 AM

ORDER NO. : 879873-005

CUSTOMER NO: 7394187

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FOREIGN FILINGS

NAME: BCE NEXXIA CORPORATE  
SERVICES 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: Alexxis Weiland -- EXT# 61592

EXAMINER: \_\_\_\_\_

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** BCE Nexxia Corporate Services 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:

Joanne Pretty

Name of Person

Bell Canada

Firm/Company

760 Topsail Road

Address

Mount Pearl, NL Canada A1N 3J5

City/State and Zip code

joanne.pretty@bellaliant.ca

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

For further information concerning this matter, please call:

Joanne Pretty

at

709

687-2046

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. BCE Nexxia Corporate Services 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. Delaware 3. 54-1781065  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. September 13, 1995 5. N/A  
(Date of incorporation) (Date of duration, if other than perpetual)

6. June 21, 2021  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 251 Little Falls Drive Wilmington Delaware United States 19808  
(Principal office street address)
- 1821 Walden Office Square, Suite 400, Schaumburg, IL 60173  
(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida 32301  
(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.*

Corporation Service Company

By:

(Registered agent's signature)

*Alexxis Weibnd, assistant vice president*

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]:

FILED  
2021 JUN 29 AM 11:03  
STATE DEPT OF STATE  
TALLAHASSEE, FL

**A. DIRECTORS**

☐ Chairman Name: See Attached  
☐ 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 \_\_\_\_\_

☐ 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. *Maria G. Margiotta*  
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. Maria G. Margiotta, Assistant Corporate Secretary  
(Typed or printed name and capacity of person signing application)

**DIRECTORS AND OFFICERS**  
**As of March 31, 2021**

**BCE NEXXIA CORPORATE SERVICES INC.**

**BOARD OF DIRECTORS**

<b>Director Name</b>	<b>Resident Canadian</b> (Yes/No) (if No, indicate residency)	<b>Date Elected</b>
<b>Thomas E. Little</b>	Canadian	2011-01-01
<b>Ivan Mihaljevic</b>	Canadian	2017-01-20

**OFFICERS**

<b>Officer Name</b>		<b>Position</b>
<b>Thomas E. Little</b>	-	Chair
<b>Ivan Mihaljevic</b>	-	President
<b>Curtis J.E. Millen</b>	-	Treasurer
<b>Robert Malcolmson</b>	-	Chief Regulatory Officer
<b>Kate Southwell</b>	-	Legal Counsel
<b>Martin Cossette</b>	-	Corporate Secretary
<b>Miguel Baz</b>	-	Assistant Corporate Secretary
<b>Maria G. Margiotta</b>	-	Assistant Corporate Secretary
<b>Eleanor Marshall</b>	-	Assistant Treasurer
<b>Jay Belodoff</b>	-	Senior Vice-President, Wholesale Sales
<b>Robin Constantin</b>	-	Senior Vice-President, Wholesale Sales
<b>Pierre Potvin</b>	-	Vice-President, Taxation
<b>Guy Mercier</b>	-	Vice-President, Carrier Relations
<b>Louis Caron</b>	-	Vice-President, BBM Sales
<b>Nicolas Payant</b>	-	Vice-President, Connectivity & Infrastructure
<b>Sylvain Crevier</b>	-	Director, Procurement
<b>Alain Cadorette</b>	-	Director, Carrier Relations
<b>Jonathan Blakey</b>	-	Director, Regulatory Affairs

**Please use the following address as the residential address for all directors and officers:**  
1821 Walden Office Square #400, Schaumburg IL 60173

# Delaware

The First State

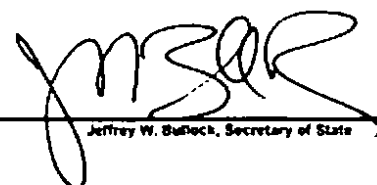
Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BCE NEXXIA CORPORATE SERVICES INC." 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-EIGHTH DAY OF JUNE, 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 "BCE NEXXIA CORPORATE SERVICES INC." WAS INCORPORATED ON THE THIRTEENTH DAY OF SEPTEMBER, A.D. 1995.

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



Jeffrey W. Bullock, Secretary of State

2543406 8300

SR# 20212570161

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

Authentication: 203553604

Date: 06-28-21