

F21000003714

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

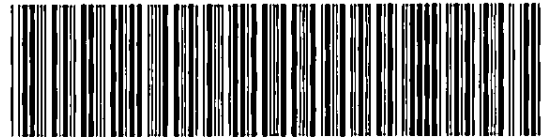
(Business Entity Name)

(Document Number)

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

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ADDRESS

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53f  
7/1/21

# Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312

(850) 656-4724

DATE 6-30-21

**\*\*WALK IN\*\***

ENTITY NAME MTE CONSULTANTS INC.

DOCUMENT NUMBER \_\_\_\_\_

**\*\*PLEASE FILE THE ATTACHED AND RETURN\*\***

XXXX  
\_\_\_\_\_  
\_\_\_\_\_

*Plain Copy*  
*Certified Copy*  
*Certificate of Status*

**\*\*PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY\*\***

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Certified Copy of Arts & Amendments*  
*Certified Copy of Arts & Amendments Complete File (Including Annual Reports)*  
*Certificate of Status*  
*Certificate of Status Reflecting:* \_\_\_\_\_

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**\*\*APOSTILLE / NOTARIAL CERTIFICATION\*\***

COUNTRY OF DESTINATION \_\_\_\_\_

NUMBER OF CERTIFICATES REQUESTED \_\_\_\_\_

TOTAL OWED \$ 78.75

ACCOUNT # 120140000108  
United Corporate  
Services, Inc.

*Keith Lippard*

Please call Tina at the above number for any issues or concerns. Thank you so much.

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** MTE Consultants 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:

Doug Winger

Name of Person

MTE Consultants Inc.

Firm/Company

520 Bingham Centre Drive

Address

Kitchener, Ontario N2B 3X9

City/State and Zip code

dwinger@mte85.com

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

For further information concerning this matter, please call:

Doug Winger

at (519) 743-6500

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

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**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. MTE Consultants 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. N/A  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. November 1, 2019 5. Perpetual  
(Date of incorporation) (Date of duration, if other than perpetual)

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

7. 520 Bingham Centre Drive, Kitchener, Ontario, Canada N2B 3X9  
(Principal office street address)  
520 Bingham Centre Drive, Kitchener, Ontario, Canada N2B 3X9  
(Current mailing address, if different)

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

Name: United Corporate Services, Inc.  
Office Address: 3458 Lakeshore Drive  
Tallahassee, Florida 32312  
(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.*

Michael A. Barr

(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]:

2021 JUN 30 PM 1:02

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# A. DIRECTORS

☒ Chairman Name: Kerry Gerber  
☐ Vice Chairman Address: 2137 Line 33  
☒ Director Shakespeare, ON N0B 2P0  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: Ted Rowe  
☐ Vice Chairman Address: 900 Keewatin Place  
☐ Director Kitchener, ON N2B 3W4  
☒ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: Doug Winger  
☐ Vice Chairman Address: 82 Winding Way  
☐ Director Kitchener, ON N2N 1M1  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☒ Treasurer  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: Rebecca Kerr  
☐ Vice Chairman Address: 105 Roslin Avenue South  
☒ Director Waterloo, ON N2L 2H3  
☐ President \_\_\_\_\_  
☒ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: Kurt Ruhland  
☐ Vice Chairman Address: 2 Griffin Gate  
☐ Director RR2 St. George Brant, ON N0E 1N0  
☐ President \_\_\_\_\_  
☒ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: Marie Sullivan  
☐ Vice Chairman Address: 18 Ivanhoe Court  
☐ Director Cambridge, ON N3C 3H3  
☐ 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. /s/ Doug Winger  
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.

Request ID: 026381569  
Demande n° :  
Transaction ID: 79811415  
Transaction n° :  
Category ID: CT  
Catégorie :

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

Date Report Produced: 2021/06/30  
Document produit le :  
Time Report Produced: 09:54:40  
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

**M T E C O N S U L T A N T S I N C .**

Ontario Corporation Number

Numéro matricule de la société (Ontario)

**0 0 5 0 1 5 6 9 3**

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

**N O V E M B E R 0 1 N O V E M B R E , 2 0 1 9**

and has not been dissolved.

et n'est pas dissoute.

Dated

Fait le

**J U N E 3 0 J U I N , 2 0 2 1**



Director  
Directeur

The issuance of this certificate in electronic form is authorized by the  
Director of Companies and Personal Property Security Branch

La délivrance du présent certificat sous forme électronique est autorisée par la  
Directrice de la Direction des compagnies et des sûretés mobilières

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