

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(City/State/Zip/Fitotie #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entity Name)
(Document Number)
(====,
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



700374235257

10/04/21-+01046-+019 **87.50

2821 OCT -4 PH 6: 29

53/11/21

COVER LETTER

TO: Registration Section Division of Corporations			
Subject: 2869739 Ontario Inc			
		- must include suffix	
D 6' M 1	•		
Dear Sir or Madam:			
The enclosed "Application by Fore "Certificate of Existence," or "Cert above referenced foreign corporations of the corporation	tificate of Good Stan	ding" and check are submitte	
Please return all correspondence co	oncerning this matter	to the following:	
Ryan Robertson			
	Name of I	Person	
Altro LLP			
<u>-</u>	Firm/Com	pany	22
155 University Avenue, Suite 300			20 17
	Addre	ess .	
Toronto, Ontario, M5H 3B7			1
	City/State ar	nd Zip code	PH
rrobertson@altrolaw.com			ي من
E-mail a	address: (to be used f	or future annual report notific	cation)
For further information concerning	this matter, please c	all:	
Ryan Robertson	(416)	477-8165	
Name of Person	Area Code	Daytime Telephone	Number
STREET/COURIER AD Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Su Tallahassee, FL 32303		MAILING ADDR Registration Section Division of Corpora P.O. Box 6327 Tallahassee, FL 32	n ations
-	IDA DEPARTMENT	OF STATE] \$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.

(If name unavail Canada	•	opted for the purpose of transacting business in Florida)
(State or countr	y under the law of which it is incorporated)	(FEI number, if applicable)
September 2		
(Date of incorporation)		(Date of duration, if other than perpetual)
	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1502	
7901 4th St N	N, STE 300. St. Petersburg, FL 33702, US	SAA
	(Principal office	address, if different)
	(Current mailing	address, if different)
		1
Name and stree	et address of Florida registered agent: (P.O. I	Box NOT acceptable)
Name:	Northwest Registered Agent LLC	6
Tice Address:	7901 4th St N. Stc 300	6: 29
	St. Petersburg	, Florida <u>33702</u>
	(City)	(Zip code)
	ent's acceptance: med as registered agent and to accept service	of process for the above stated corporation at the pla nt as registered agent and agree to act in this capacit
aving been nam signated in this rther agree to c		
laving been names esignated in this orther agree to c	application, I hereby accept the appointment omply with the provisions of all statutes rela	

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

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

A. DIRECTORS Name: _David Diciocco ☐ Chairman ☐ Chairman Address: 294 Talbot Road E. Address: _____ ☐ Vice Chairman ☐ Vice Chairman Leamington, Ontario, N8H 3V6 ■ Director □Director ■ President □President □Vice President □Vice President **■** Treasurer □ Secretary ☐Treasurer ■ Secretary □Other_____ □Other _____ □Other _____ □Other _____ □Chairman □ Chairman Name: ______ Name: ____ ☐ Vice Chairman Address: □Vice Chairman Address: _____ □ Director □ Director □ President □ President □ Vice President ___ ☐ Vice President □ Treasurer □ Secretary ☐ Treasurer → ☐ Secretary □Other _____ ☐Other _____ □Other _____ □ Chairman □Chairman Name: ____ σ Address: ______ ☐Vice Chairman □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/ David Diciocco 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.

David Diciocco, President - 2869739 Ontario Inc.

Request ID:

026763659

Demande n° :

Transaction ID: 80722896

Transaction nº: Category ID: Catégorie :

Province of Ontario Province de l'Ontario

Ministry of Government Services Ministère des Services gouvernementaux Date Report Produced: 2021/09/29

Document produit le :

Time Report Produced: 11:28:04

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

2869739 ONTARIO INC.

Ontario Corporation Number

Numéro matricule de la société (Ontario)

002869739

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

SEPTEMBER 27 SEPTEMBRE, 2021

and has not been dissolved.

et n'est pas dissoute.

Dated

Fait le

SEPTEMBER 29 SEPTEMBRE, 2021

Director

Salbara Rachitt

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 autorisée par le Ministère des Services gouvernementaux.