

# F2100007228

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H21000458547 3)))



H210004585473ABC3

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.**  
Doing so will generate another cover sheet.

To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : GILLIGAN, GOODING, BATSEL, ANDERSON & PHELAN, P.A.  
Account Number : I20010000016  
Phone : (352)867-7707  
Fax Number : (352)867-0237

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: jgooding@ocalalaw.com

## FOREIGN PROFIT/NONPROFIT CORPORATION

### Calibrex Ocala Ontario GP Inc.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

2021 DEC 16 PM 4:55

FAX AUDIT NUMBER: H210004585473ABC3

APPROVED  
AND  
FILED  
2021 DEC 10 AM 11:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

DEC 16 2021

K. Brumbley

DocuSign Envelope ID: 7E5C2FF2-678E-49A1-88F8-08CB04A77198

~~H210004506613~~~~H210004585473~~**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Calibrex Ocala Ontario GP 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:

W. James Gooding III

Name of Person

Gilligan, Gooding, Batsel, Anderson & Phelan, P.A.

Firm/Company

1531 SE 36th Avenue

Address

Ocala, FL 34471

City/State and Zip code

jgooding@ocalalaw.com

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

For further information concerning this matter, please call:

Barbara Noel

at (352) 867-7707 ext 229

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

H210004585473

H210004585473

DocuSign Envelope ID: 7E5C2FF2-678E-49A1-86F6-08CB04A7719B

# APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

H210004585473

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. Calibrex Ocala Ontario GP 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. November 4, 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. 1100 Gorham Street, Unit 18, Newmarket, Ontario, Canada, L3Y 8Y8

(Principal office street address)

(Current mailing address, if different)

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

Name: W. James Gooding III

Office Address: 1531 SE 36th Avenue

Ocala

(City)

, Florida 34471

(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.

(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.

H210004585473

H210004585473

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

2021 DEC 10 AM 11:40  
SECRETARY OF STATE  
TAMM LAMARCA, JR. (0000)

APPROVED  
AND  
FILED

DocuSign Envelope ID: 7E5C2FF2-678E-49A1-88F6-08CB04A77198

**A. DIRECTORS**

☐ Chairman Name: Nolan Barchiesi

☐ Vice Chairman Address: 1100 Gorham Street, Unit 18

☒ Director Newmarket, Ontario, Canada, L3Y 8Y8

☐ 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. Nolan Barchiesi  
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. Nolan Barchiesi  
(Typed or printed name and capacity of person signing application)

~~#210004506613~~ #210004585473

H 210004585473  
~~#210004506613~~

Transaction Number / Numéro de transaction: APP-124589651122  
Generated on: November 09, 2021, 12:50 / Généré le: 09 novembre 2021, 12:50



Ministry of Government and  
Consumer Services  
Ministère des Services gouvernementaux et  
des Services aux consommateurs

## Certificate of Status

## Attestation du statut juridique

Business Corporations Act

Loi sur les sociétés par actions

This is to certify that

La présente vise à attester que

**CALIBREX OCALA ONTARIO GP INC.**

Corporation Name / Dénomination sociale

**1000017469**

Ontario Corporation Number / Numéro de société de l'Ontario

is a corporation incorporated, amalgamated or continued  
under the laws of the Province of Ontario according to the  
electronic records maintained by the Ministry of  
Government and Consumer Services.

est une société constituée en personne morale, fusionnée  
ou maintenue conformément aux lois de la province de  
l'Ontario, selon les dossiers électroniques tenus par le  
ministère des Services gouvernementaux et des Services  
aux consommateurs.

The corporation came into existence on November 04, 2021  
and has not been dissolved.

La société a vu le jour le 04 novembre 2021  
et n'a pas été dissoute.

*Barbara Duckitt*

Director / Directeur  
Business Corporations Act / Loi sur les sociétés par actions

Certified a true copy of the record of the  
Ministry of Government and Consumer Services.

*Barbara Duckitt*

Director/Registrar

H 210004585473



Copie certifiée conforme du dossier du  
ministère des Services gouvernementaux et des  
Services aux consommateurs.

*Barbara Duckitt*

Director ou registraire