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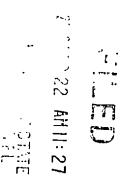
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S. HAWKES

#### **COVER LETTER**

_	iration Section ion of Corporations			
SUBJECT:	NOVUS US LAND HOLDING	S INC.		
	Name of corporation - must include suffix			
Dear Sir or M	adam:			
"Certificate of	"Application by Foreign Corp f Existence," or "Certificate of ced foreign corporation to tran	Good Stand	ing" and check are sub-	
Please return	all correspondence concerning	this mater t	a the following:	
Sebastian Jarai	nillo, Esq.			
		Name of P	erson	
Sebastian Jarar	nillo PA			
		Firm/Comp	any	
250 NE 25 Stre	eet Suite 203			
		Addres	S	
Miami, FL 331	37			
	(	City/State and	d Zip code	
sebastian@law	•			
	E-mail address: (	to be used fo	r future annual report n	otification)
For further in	formation concerning this mat	•		
Sebastian Jarar	nillo at	at (786 ) 3060451  Area Code Daytime Telephone Number		
Name	e of Person	Area Code	Daytime Telepl	none 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	
	check for the following amounteek payable to: FLORIDA DEP ing Fee S78.75 Filing I Certificate of (	ARTMENT ( Fee & □	OF STATE \$78.75 Filing Fee & Certified Copy	S87.50 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.

	able in Florida, enter alternate corporate name a				
2. Canada	y under the law of which it is incorporated)	None	····		
(Date	(Date of incorporation) 5. (Date of duration, if other than perpetual)				
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.15 , Cape Coral, FL 33914  (Principal of Face)	, , ,	,		
2711 Caistor Cer	ntre Rd. Smithville, ON, Canada LOR 2A0	<u> </u>		(5.3	
	(Current mailin	g address, if different)	<del> </del>	-	
3. Name and <u>stre</u> Name:	et address of Florida registered agent: (P.O Harry Ludwig	D. Box NOT acceptable)			
	4(N)6 SW 25 Place			AH 11: 20	-
)ffice Address:	Cape Coral (City)	, Florida 33914	<del></del> 5	20	
Office Address:					
Office Address:	(City)	(Zip code)			

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

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

A. DIRECTORS			
□Chairman	Name: Harry Ludwig	□ Chairman	Name:
□Vice Chairman	Address: 2711 Caistor Centre Rd	□Vice Chairman	Address:
Director	Smithville, ON L0R 2A0	Director	
□President	Canada	□President	
□Vice President		□Vice President	
□Secretary	□Treasurer	☐ Secretary	□Treasurer
□Other	Other	□Other	Other
□Chairman	Name:	□Chairman	Name:
□Vice Chairman	Address:	□Vice Chairinan	Address:
□Director		□Director	
□President		□\President	
□Vice President		□Vice President	
□Secretary	□Treasurer	□ Secretary	□Treasurer
□Other	(10ther	□Other	□Other
□Chairman	Name:	Chairman	Name:
□Vice Chairman	Address:	□Vice Chairman	Address:
□Director		□Director	
□President		□President	
□Vice President		□Vice President	
□Secretary	□Treasurer	. DSecretary	□Treasurer
ZOther	Other	□Other	□ Other
	Use an attachment to report more than six (6). The at added to the index when filing your Florida Departs	ment of State Annual Ro	teport form.
· <del>-</del> · ———	Signature of Director	r or Officer	
she is aware that fa s.817.155, F.S.	eter signing this document (and who is listed in numbers information submitted in a document to the Depart		
13. Trainy Eddin.	<u> </u>		<del></del>



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 sociétes par actions

This is to certify that

La présente vise à attester que

	NOVUS US LAND HOLDINGS INC.		
-	Corporation Name / Dénomination sociale	٠	·

#### 1000019070

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 05, 2021 and has not been dissolved.

La société a vu le jour le 05 novembre 2021 et n'a pas été dissoute.

Director / Directeur

Business Corporations Act / Loi sur les sociétés par actions

Sachara Duckett

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

Director/Registrar

Sachara Duchett

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

Sachaea Ducketts

Directeur ou registrateur