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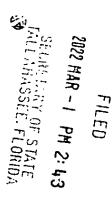


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T. LEMIEUX MAR 24 2022

## **COVER LETTER**

TO:	Registration Section Division of Corporations				
SUBJ	ECT: Monbane Corporation				
5050		of corporation -	- must i	nclude suffix	
Dear S	ir or Madam:				
"Certif	closed "Application by Foreign Co ficate of Existence," or "Certificate referenced foreign corporation to tr	of Good Stand	ling" ar	nd check are subm	
Please	return all correspondence concerni	ng this matter	to the fe	ollowing:	
Daniel	W.K. Rafuse				
		Name of P	erson		
Monba	nc Corporation				
		Firm/Comp	any		
1360 L	akeshore Dr				
		Addre	SS -		
Dorval	, QC H9S 2E5				
		City/State an	d Zip c	ode	
daniel(	@monbanc.com				
	E-mail address	: (to be used fo	or futur	e annual report no	tification)
For fu	rther information concerning this m	atter, please ca	ıll:		
Anda N	Malescu	786 at (	410-6	6841 Daytime Telepho	
	Name of Person	Area Code	-/ <del></del> -	Daytime Telepho	one Number
	STREET/COURIER ADDRESS Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			MAILING AD Registration Sec Division of Cor P.O. Box 6327 Tallahassee, FL	ction porations
Please	sed is a check for the following amount in the check payable to: FLORIDA DE 0.00 Filing Fee	EPARTMENT g Fee & 🗆	\$78.75	ATE 5 Filing Fee & ied 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.

•	•	dopted for the purpose of transacting business in Flori
Delaware	3.	38-4195869
0/01/0021	under the law of which it is incorporated)	(FEI number, if applicable)
9/21/2021	5.	(Date of duration, if other than perpetual)
(Date o	or incorporation)	(Date of duration, if other than perpetual)
		Florida, if prior to registration) 02. F.S to determine penalty liability)
52 Chapman Rd,	Newark DE 19702	
5 SE 2nd Ave Su	(Principal officite 725, Miami, FL 33131	ee <u>street</u> address)
	(Current mailin	g address, if different)
Name and <u>street</u> Name:	address of Florida registered agent: (P.O. Malescu Law, PA	Box NOT acceptable)  , Florida 33131  (Zip code)
fice Address:	25 SE 2nd Ave. Suite 725	
	Miami	, Florida 33131
	(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 Sergio Haskour Name: Daniel W. K. Rafuse □ Chairman Chairman 262 Chapman Rd 262 Chapman Rd Address: □Vice Chairman Address: □ ☐ Vice Chairman Newark DE 19702 Newark DE 19702 □ Director 🗃 Director □ President □ President ☐ Vice President ☐ Vice President □Treasurer □ Secretary □ Treasurer ☐ Secretary □Other \_\_\_\_\_ □Other \_\_\_\_\_ □Other \_\_\_\_\_ □Other \_\_\_\_\_ □ Chairman Name: □Chairman Name: \_\_\_\_\_ ☐ Vice Chairman Address: \_\_\_\_\_\_ □Vice Chairman Address: \_\_\_\_\_ Director Director □President President □Vice President □Vice President ☐ Treasurer □ Secretary □Treasurer □ Secretary □Other \_\_\_\_\_ □Other \_\_\_\_\_ □Other \_\_\_\_\_ □Other \_\_\_\_\_ Name: \_\_\_\_\_ □Chairman □Chairman Name: \_\_\_\_\_ □Vice Chairman Address: \_ \_ \_ \_ \_ \_ \_ □ Vice Chairman Address: \_\_\_\_\_ □ Director □ Director ☐ President □President □Vice President ☐ Vice President ☐ Secretary □Treasurer ☐ Secretary Treasurer □Other \_\_\_\_\_ Other \_\_\_\_\_ □Other \_\_\_\_\_ Other \_\_\_\_\_ Important Notice: Use an attachment to report more than six (6). The autofinient 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. or 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. Daniel Rafuse - Chairman

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "MONBANC CORPORATION" 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-FIRST DAY OF FEBRUARY, A.D.

2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MONBANC CORPORATION" WAS INCORPORATED ON THE TWENTY-FIRST DAY OF SEPTEMBER,

A.D. 2021.

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

Authentication: 202723287

Date: 02-21-22