

220000034/6

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2022 JUN -1 PM 4:14
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA
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S. FRANKLIN

JUN 02 2022

**CORPORATE
ACCESS,
INC.**

When you need ACCESS to the world

236 East 6th Avenue, Tallahassee, Florida 32303
P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

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INC

1. **HEDSON TECHNOLOGIES NORTH AMERICA, INC**

(CORPORATE NAME AND DOCUMENT #)

2. _____
(CORPORATE NAME AND DOCUMENT #)

3. _____
(CORPORATE NAME AND DOCUMENT #)

4. _____
(CORPORATE NAME AND DOCUMENT #)

5. _____
(CORPORATE NAME AND DOCUMENT #)

6. _____
(CORPORATE NAME AND DOCUMENT #)

**SPECIAL
INSTRUCTIONS:**

2022 JUN -1 PM 4:14

COVER LETTER

TO: Registration Section
Division of Corporations
Hedson Technologies North America, Inc.

SUBJECT: _____
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:
Michael Bertrand

_____	Name of Person
Hedson Technologies North America, Inc.	
_____	Firm/Company
466 Speers Road, 3rd Floor	
_____	Address
Oakville, ON L6K 3W9, Canada	
_____	City/State and Zip code
nils.norheim@hedson.com	
_____	E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

Nils Norheim	416	273-8358
_____	at (_____)	_____
Name of Person	Area Code	Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☒ \$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

**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.*

Hedson Technologies North America, Inc.

1. _____
(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)

Illinois

98-0213453

2. _____ 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)

Sept. 10, 1998

4. _____ 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)

June 1, 2022 (anticipated date)

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

466 Speers Road, 3rd Floor, Oakville ON L6K 3W9, Canada

7. _____
(Principal office address)

(Current mailing address, if different)

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

Corporate Access, Inc.

Name:

236 E. 6th Avenue

Office Address:

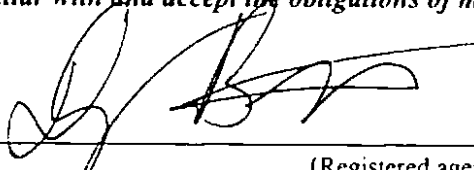
Tallahassee

32303

_____, Florida _____
(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.



(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.

2022 JUL -1 PM 4:14

11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Lennart Eriksson

Address: Hammarvaegen 4, 232 37 Arloev, Sweden

Director: Rose-Marie Reimer

Address: Hammarvaegen 4, 232 37 Arloev, Sweden

B. OFFICERS

President: Michael Bertrand

Address: 466 Speers Road, 3rd Floor, Oakville ON L6K 3W9, Canada

Vice President: _____

Address: _____

Secretary: Annette G Guenther

Address: 263 Shuman Blvd, Suite 145, Naperville, IL 60563

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. _____

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.

Michael Bertrand, President

13. _____

(Typed or printed name and capacity of person signing application)

2022 JUN - 1 PM 4:14

11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Lennart Eriksson

Director: _____

Hammarvaegen 4, 232 37 Arlöev, Sweden

Address: _____

Rose-Marie Reimer

Director: _____

Hammarvaegen 4, 232 37 Arlöev, Sweden

Address: _____

B. OFFICERS

Michael Bertrand

President: _____

466 Speers Road, 3rd Floor, Oakville ON L6K 3W9, Canada

Address: _____

Vice President: _____

Address: _____

Annette G Guenther

Secretary: _____

263 Shuman Blvd, Suite 145, Naperville, IL 60563

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12.  _____

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) attests 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.

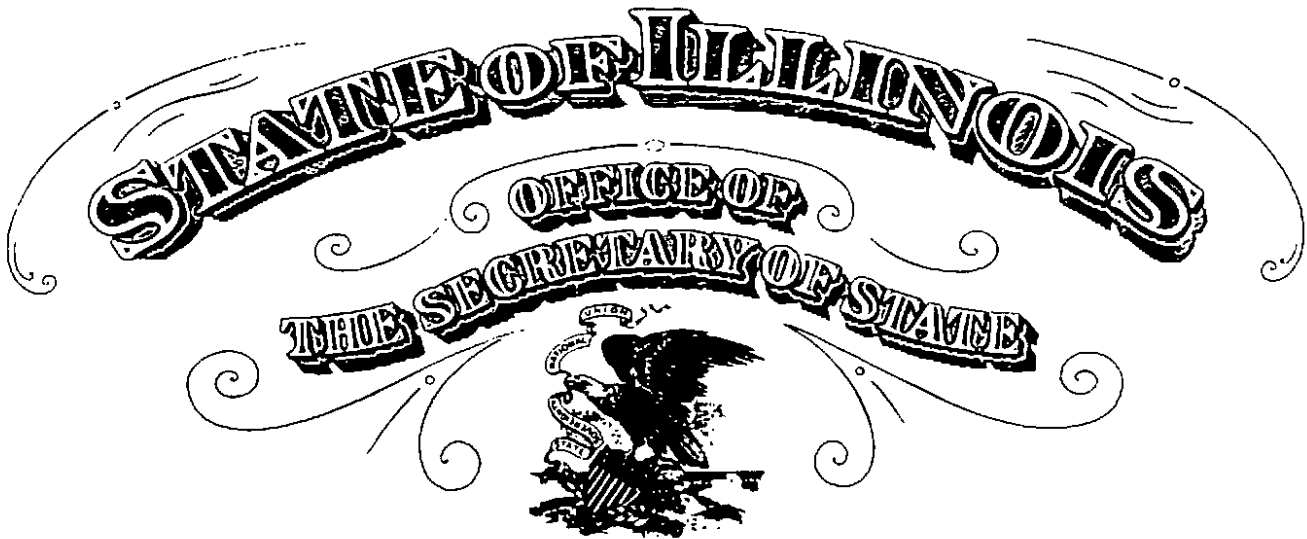
Michael Bertrand, President

13. _____

(Typed or printed name and capacity of person signing application)

File Number

6012-189-3



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

HEDSON TECHNOLOGIES NORTH AMERICA, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON SEPTEMBER 10, 1998, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.

2022
MAY 14
PM 4:14



In Testimony Whereof, I hereto set
my hand and cause to be affixed the Great Seal of
the State of Illinois, this 31ST
day of MAY A.D. 2022 .

Jesse White

SECRETARY OF STATE