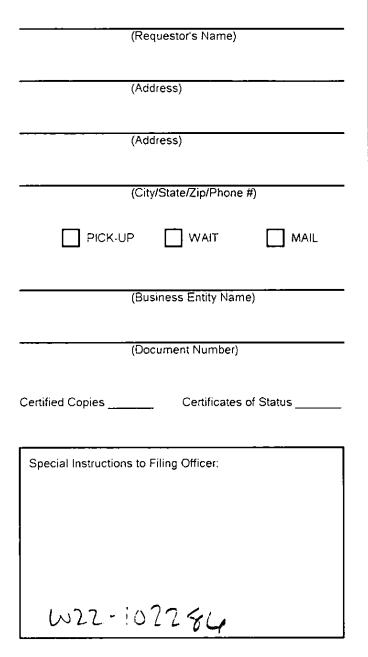
# F22000005047



Office Use Only



600391747966

08/08/22--01005--002 ••76.75

FILED

2022 AUG 10 AM 9: 17

SECRELARY OF STATE
INTERPRETATION

NIS 1 1 2022 C Brumbby

# CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

| PROVINCIAL STORE FIXTURES LIMITED |                                 |
|-----------------------------------|---------------------------------|
|                                   |                                 |
|                                   |                                 |
|                                   | -                               |
|                                   |                                 |
|                                   | Art of Inc. File                |
|                                   | LTD Partnership File            |
|                                   | Foreign Corp. File              |
|                                   | L.C. File                       |
|                                   | Fictitions Name File            |
|                                   | Trade/Service Mark              |
|                                   | Merger File Art. of Amend. File |
|                                   | RA Resignation                  |
|                                   | Dissolution / Withdrawał        |
|                                   | Annual Report / Reinstatement   |
|                                   | Cert. Copy                      |
|                                   | Photo Copy                      |
|                                   | Certificate of Good Standing    |
|                                   | Certificate of Status           |
|                                   | Certificate of Fictitious Name  |
|                                   | Corp Record Search              |
|                                   | Officer Search                  |
|                                   | Fictitious Search               |
| Signature                         | Fictitious Owner Search         |
| Signature                         | Vehicle Search                  |
|                                   | Driving Record                  |
| Requested by: SETH 08/10          | UCC 1 or 3 File                 |
| Name 08/10  Date Time             | UCC 11 Search                   |
| Date Time                         | UCC 11 Retrieval                |
| Walk-In Will Pick Up              | Courier                         |

## **COVER LETTER**

| то:      | O: Registration Section Division of Corporations  |   |  |  |  |
|----------|---|---|--|--|--|
| SHRI     | ECT: PROVINCIAL   | STORE FIXTURES LIMI   | TED CORP.  |  |  |
| CODA     |   | Name of corporation   | on - must include suffix   |  |  |
| Dear S   | Sir or Madam:   |   | •  |  |  |
| "Certi   | ficate of Existence," o   |   | or Authorization to Transact<br>anding" and check are subm<br>ness in Florida.         |  |  |
| Please   | return all corresponde  | ence concerning this matt   | er to the following:   |  |  |
| Kimbe    | rly Rossetti  |   |  |  |  |
|          | . —   | Name o  | of Person  |  |  |
| Provin   | cial Store Fixtures Limit   | ed  |  |  |  |
|          |   | Firm/Co   | ompany   |  |  |
| 910 C    | entral Parkway West,  |   |  |  |  |
|          |   | Ado   | lress  |  |  |
| Missis   | sauga, Ontario Canada I   | 5C 2V5  |  |  |  |
| •        |   | City/State  | and Zip code   |  |  |
| kimber   | ly.rossetti@psfltd.com  |   |  |  |  |
|          | 17  | -mail address: (to be used  | for future annual report no  | tification)  |  |
| For fu   | ther information conc   | erning this matter, please  | call:  |  |  |
| Kimbe    | rly Rossetti  | at ( 905  | ode Daytime Telepho  | )  |  |
|          | Name of Person  | Area Co   | ode Daytime Telepho  | one Number   |  |
|          | STREET/COURIE<br>Registration Section<br>Division of Corpora<br>The Centre of Tallah<br>2415 N. Monroe Str<br>Tallahassee, FL 323 | tions<br>nassec<br>cet, Suite 810   | MAILING AD<br>Registration Sec<br>Division of Corp<br>P.O. Box 6327<br>Tallahassee, FL | ction<br>porations   |  |
| Please i | ed is a check for the fi<br>make check payable to:<br>.00 Filing Fee  | ollowing amount: FLORIDA DEPARTMEN \$78.75 Filing Fee & Certificate of Status | T OF STATE  \$78.75 Filing Fee & Certified Copy  | <ul> <li>\$87.50 Filing Fee,</li> <li>Certificate of Status &amp;</li> <li>Certified Copy</li> </ul> |  |

# 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.

| 1. (Enter name of | . STORE FEXTURES LIMITED  corporation: must include "INCORPORATED,"  Corp.," "Inc.," "Co.," or "Corp.,")                    | "COMPANY," "CORPORATION                     | <u></u>                                       |  |
|-------------------|---|---|---|--|
| PROVINCIAI        | . STORE FIXTURES LIMITED CORP.  |   |   |  |
| (If name unavai   | lable in Florida, enter alternate corporate name ad-  | opted for the purpose of transacting        | g business in Florida)                        |  |
| 2. Ontario, Canad | la 3  |   |   |  |
| (State or coun    |   |   | (FEI number, if applicable)                   |  |
| (Dat              | e of incorporation) 5.  | (Date of duration, if other than perpetual) |   |  |
|                   | (Date first transacted business in F<br>(SEE SECTIONS 607.1501 & 607.1502<br>(way West, Mississauga, Ontario, L5C 2V5, Cana | ida   | ·y)   |  |
|                   | (Principal office   | street address)                             |   |  |
|                   | (Current mailing a  | address, if different)                      | SECRETALL AHA                                 |  |
| 8. Name and stro  | et address of Florida registered agent: (P.O. 1   | Box <u>NOT</u> acceptable)                  | <b>高度                                    </b> |  |
| Name:             | InCorp Services, Inc.   |   | FILE<br>10<br>SSEE<br>SSEE                    |  |
| Office Address:   | 17888 67th Court North  |   | 7 ST  |  |
|                   | Loxahatchee   | , Florida                                   | 98 17<br>1 %                                  |  |
|                   | (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.

Lesley Gonzalez on behalf of InCorp Services, Inc. (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.

| A. DIRECTORS   |   |                            |                                   |  |  |  |  |
|--|---|----------------------------|-----------------------------------|--|--|--|--|
| — Chairman   | Name:   | -Chairman                  | Name:                             |  |  |  |  |
| Vice Chairman  | Address: 910 Central Parkway West   | -Vice Chairman             | Address:                          |  |  |  |  |
| - <sub>Director</sub>  | Mississauga, Ontario L5C 2V5  | -Director                  | Mississauga, Ontario L5C 2V5      |  |  |  |  |
| X President  | Canada  | President                  | Canada                            |  |  |  |  |
| -Vice President  |   | Vice President             |                                   |  |  |  |  |
| Secretary  | Treasurer   | Secretary                  | Treasurer                         |  |  |  |  |
| X Other  | Other   | ∑Other CFO                 | Other                             |  |  |  |  |
| — Chairman   | Name:   | — Chairman                 | Name:                             |  |  |  |  |
| Vice Chairman  | 910 Central Parkway West  | <sup>→</sup> Vice Chairman | Address: 910 Central Parkway West |  |  |  |  |
| Director   | Mississauga, Ontario L5C 2V5  | X Director                 | Mississauga, Ontario LSC 2V5      |  |  |  |  |
| -President   | Canada  | - President                | Canada                            |  |  |  |  |
| Vice President   |   | Vice President             |                                   |  |  |  |  |
| Secretary  | ₹ Treasurer   | Secretary                  | Treasurer                         |  |  |  |  |
| Other  | Other   | Other                      | Other                             |  |  |  |  |
| Director   | Joubran, Samir Name: 910 Central Parkway West Address: Mississauga, Ontario L5C 2V5 | Director                   | Name:                             |  |  |  |  |
| President  | ·   | President                  |                                   |  |  |  |  |
| Vice President   |   | Vice President             |                                   |  |  |  |  |
| Secretary  | Treasurer   | Secretary                  | Treasurer                         |  |  |  |  |
| Other |   |                            |                                   |  |  |  |  |
|  | / 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.

.. Edward Joubran, President and CEO

Transaction Number / Numéro de transaction: APP-A10008807746 Generated on: August 02, 2022, 09:04 / Généré le: 02 août 2022, 09:04



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

## PROVINCIAL STORE FIXTURES LIMITED

Corporation Name / Dénomination sociale

### 340885

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.

The corporation came into existence on July 28, 1976 and has not been dissolved.

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.

La société a vu le jour le 28 juillet 1976 et n'a pas été dissoute.

V. Quintarilla W.

Business Corporations Act / Loi sur les sociétés par actions

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

V. (luiv)antla W.

Director/Registrar



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

V. Quintarilla W.

Directeur ou registrateur