

F220000006757

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

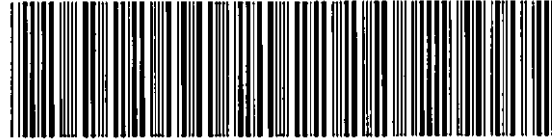
(Business Entity Name)

(Document Number)

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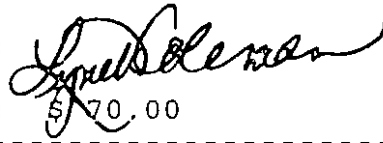
CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 068004 8357047

AUTHORIZATION :

COST LIMIT : \$70.00



ORDER DATE : October 21, 2022

ORDER TIME : 2:19 PM

ORDER NO. : 068004-005

CUSTOMER NO: 8357047

FOREIGN FILINGS

NAME: VIVE CROP PROTECTION INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Elyliena Baker -- EXT#

EXAMINER: _____

**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. Vive Crop Protection 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 3. 98-1180358
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. March 30, 2006 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)
6. August 22, 2022
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 6275 Northam Dr. suite 1. Mississauga ON, L4V 1Y8
(Principal office street address)
- _____
(Current mailing address, if different)
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
- Name: Corporation Service Company
- Office Address: 1201 Hays Street
- Tallahassee, Florida 32301
(City) (Zip code)

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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.

Corporation Service Company

By: _____

Eyelina Bahor
Assistant Vice President

(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.

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

A. DIRECTORS

☐ Chairman Name: Darren Anderson
☐ Vice Chairman Address: 6275 Northam Dr, Suite 1
☒ Director Mississauga, ON, L4V 1Y8
☐ President Canada
☐ Vice President _____
☐ Secretary ☐ Treasurer
☒ Other CEO ☐ Other _____

☒ Chairman Name: Keith Thomas
☐ Vice Chairman Address: 6275 Northam Dr, Suite 1
☒ Director Mississauga, ON, L4V 1Y8
☐ President Canada
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

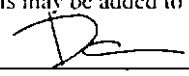
☐ Chairman Name: William Lambert
☐ Vice Chairman Address: 6275 Northam Dr, Suite 1
☒ Director Mississauga, ON, L4V 1Y8
☐ President Canada
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: Warren Libby
☐ Vice Chairman Address: 6275 Northam Dr, Suite 1
☒ Director Mississauga, ON, L4V 1Y8
☐ President Canada
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: Amy O'Shea
☐ Vice Chairman Address: 6275 Northam Dr, Suite 1
☒ Director Mississauga, ON, L4V 1Y8
☐ President Canada
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: Kyle Scott
☐ Vice Chairman Address: 6275 Northam Dr, Suite 1
☒ Director Mississauga, ON, L4V 1Y8
☐ President Canada
☐ 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. 
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. Darren Anderson
(Typed or printed name and capacity of person signing application)



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

VIVE CROP PROTECTION INC.

Corporation Name / Dénomination sociale

1693650

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 March 30, 2006
and has not been dissolved.

La société a vu le jour le 30 mars 2006
et n'a pas été dissoute.

V. Quintanilla W.

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.

V. Quintanilla W.
Director/Registrar



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

V. Quintanilla W.
Directeur ou registrateur