Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000021992 3)))



H240000219923ABC\$

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : CAPITOL SERVICES, INC.

Account Number : I20160000017 Phone : (855)498-5500

Fax Number : (800)432-3622

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:									

2024 JAN 16 AM 11: 25

FOREIGN PROFIT/NONPROFIT CORPORATION MILMAN & COMPANY CHARTERED PROFESSIONAL ACCOUNTANTS

**corrected, please honor original submission date of 1/16/24

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$78.75

**corrected, please honor original submission date of 1/16/24

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

ΓΟ: Registration Section Division of Corporations	
•	SIONAL ACCOUNTANTS (A PROFESSIONAL
Name of corporation - must i	nclude suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Authorize "Certificate of Existence," or "Certificate of Good Standing" are above referenced foreign corporation to transact business in Flo	d check are submitted to register the
Please return all correspondence concerning this matter to the fo	ollowing:
Philip Ophir Miln	nan
Name of Perso	II.
1	·
Firm/Company	
1881 Steeles Avenue West,	Suite 203
Address	Suite 200
(n	6374
Toronto, Ontario M3H City/State and Zip o	
info@taxonweb.ca / pmilma E-mail address: (to be used for futur	n@taxonweb.ca
For further information concerning this matter, please call:	
Philip Ophir Milman at (416) 736	
Name of Person Area Code	Daytime Telephone Number
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations The Centre of Tallahassee	Division of Corporations P.O. Box 6327
2415 N. Monroe Street, Suite 810	
Tallahassee, FL 32303	Tallahassee, FL 32314
Enclosed is a check for the following amount: Please make check payable to: PLORIDA DEPARTMENT OF STA	ATE
	Filing Fee & \$ Filing Fee,
-	ied Copy 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.

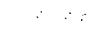
(State or country under the law of which it is incorporated) 2007/08/02 (Date of incorporation) (Date of duration, if other than perpetual) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 1881 Steeles Avenue West, Suite 203, Toronto, Ontario, Canada M3H 5Y4 (Principal office street address) 66 W Flagler Street, Suite 900, Miami, FL 33130 (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Starthub Virtual LLC		
(Date of incorporation) (Date of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 1881 Steeles Avenue West, Suite 203, Toronto, Ontario, Canada M3i-1544 (Principal office street address) 66 W Flagler Street, Suite 900, Miami, FL 33130 (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Starthub Virtual LLC Office Address: 66 W Flagler Street, Suite 900. Miami. (City) (City) Registered agent's acceptance: Verying been named as registered agent and to accept service of process for the above stated corporation at the placesignated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity arther agree to comply with the provisions of all statutes relative to the proper and complete performance of my designated in the proper and complete performance of my designated in the place of the above stated corporation at the places of the agree to comply with the provisions of all statutes relative to the proper and complete performance of my designated in the place of the agree to complete performance of my designated in the place of the agree to complete performance of my designated in the place of the agree of the agree of the proper and complete performance of my designated in the place of the agree of the proper and complete performance of my designated in the place of the proper and complete performance of my designated in the place of the proper and complete performance of my designated in the place of the proper and complete performance of my designated in the place of the proper and complete performance of my designated in the place of the proper and complete performance of my designated in the place of the proper and complete performance of my designated in the place of the proper and complete performance of my designated in the place of the proper and complete performance	Ontario, Canada (State or country under the law of which it is incorporated) (FEI number, if applicable)	
(Date of incorporation) (Date of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 1881 Steeles Avenue West, Suite 203, Toronto, Ontario, Canada M3i-1544 (Principal office street address) 66 W Flagler Street, Suite 900, Miami, FL 33130 (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Starthub Virtual LLC Office Address: 66 W Flagler Street, Suite 900. Miami. (City) (City) Registered agent's acceptance: Verying been named as registered agent and to accept service of process for the above stated corporation at the placesignated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity arther agree to comply with the provisions of all statutes relative to the proper and complete performance of my designated in the proper and complete performance of my designated in the place of the above stated corporation at the places of the agree to comply with the provisions of all statutes relative to the proper and complete performance of my designated in the place of the agree to complete performance of my designated in the place of the agree to complete performance of my designated in the place of the agree of the agree of the proper and complete performance of my designated in the place of the agree of the proper and complete performance of my designated in the place of the proper and complete performance of my designated in the place of the proper and complete performance of my designated in the place of the proper and complete performance of my designated in the place of the proper and complete performance of my designated in the place of the proper and complete performance of my designated in the place of the proper and complete performance of my designated in the place of the proper and complete performance of my designated in the place of the proper and complete performance	(State or country under the law of which it is incorporated) (FEI number, it applicable)	
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 1881 Steeles Avenue West, Suite 203, Toronto, Ontario, Canada M3H 5Y4 (Principal office street address) 66 W Flagler Street, Suite 900, Miami, FL 33130 (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Starthub Virtual LLC Office Address: 66 W Flagler Street, Suite 900. Miami. (City) Registered agent's acceptance: Itaving been named as registered agent and to accept service of process for the above stated corporation at the place esignated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity arther agree to comply with the provisions of all statutes relative to the proper and complete performance of my designated in the proper and complete performance of my designated in the proper and complete performance of my designated in the proper and complete performance of my designated in the proper and complete performance of my designated in the proper and complete performance of my designated in the proper and complete performance of my designated in the proper and complete performance of my designated in the proper and complete performance of my designated in the proper and complete performance of my designated in the place in the proper and complete performance of my designated in the place in the pla		
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 1881 Steeles Avenue West, Suite 203, Toronto, Ontario, Canada M3H 5Y4 (Principal office street address) 66 W Flagler Street, Suite 900, Miami, FL 33130 (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Starthub Virtual LLC Office Address: 66 W Flagler Street, Suite 900. Miami. (City) Registered agent's acceptance: Itaving been named as registered agent and to accept service of process for the above stated corporation at the place esignated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity arther agree to comply with the provisions of all statutes relative to the proper and complete performance of my designated in the proper and complete performance of my designated in the proper and complete performance of my designated in the proper and complete performance of my designated in the proper and complete performance of my designated in the proper and complete performance of my designated in the proper and complete performance of my designated in the proper and complete performance of my designated in the proper and complete performance of my designated in the proper and complete performance of my designated in the place in the proper and complete performance of my designated in the place in the pla	2007/08/02 5	_
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 1881 Steeles Avenue West, Suite 203, Toronto, Ontario, Canada M3H 5Y4 (Principal office street address) 66 W Flagler Street, Suite 900, Miami, FL 33130 (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Starthub Virtual LLC Office Address: 66 W Flagler Street, Suite 900. Miami. (City) (City	(Date of incorporation) (Date of duration, if other than perpetual)	
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 1881 Steeles Avenue West, Suite 203, Toronto, Ontario, Canada M3H 5Y4 (Principal office street address) 66 W Flagler Street, Suite 900, Miami, FL 33130 (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Starthub Virtual LLC office Address: 66 W Flagler Street, Suite 900. Miami. , Florida 33130 (City) , Florida 33130 (City) , Florida agent's acceptance: Itaving been named as registered agent and to accept service of process for the above stated corporation at the place assignated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity arther agree to comply with the provisions of all statutes relative to the proper and complete performance of my a		
(Principal office street address) 66 W Flagler Street, Suite 900, Miami, FL 33130 (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Starthub Virtual LLC Office Address: 66 W Flagler Street, Suite 900. Miami. (City) (City) (City) (City) Registered agent's acceptance: Taving been named as registered agent and to accept service of process for the above stated corporation at the place assignated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity arther agree to comply with the provisions of all statutes relative to the proper and complete performance of my designated in the proper and complete performance of my d		
(Principal office street address) 66 W Flagler Street, Suite 900, Miami, FL 33130 (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Starthub Virtual LLC ffice Address: 66 W Flagler Street, Suite 900. Miami. , Florida 33130 (City) (Zip code) Registered agent's acceptance: Taving been named as registered agent and to accept service of process for the above stated corporation at the place assignated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity arther agree to comply with the provisions of all statutes relative to the proper and complete performance of my designated.	1881 Steeles Avenue West, Suite 203, Toronto, Ontario, Canada M3H 5Y4	_
Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Starthub Virtual LLC ffice Address: 66 W Flagler Street, Suite 900. Miami. , Florida 33130 (Zip code) Registered agent's acceptance: (Otty) Registered agent and to accept service of process for the above stated corporation at the placesignated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity arther agree to comply with the provisions of all statutes relative to the proper and complete performance of my designated in the proper and complete performance of my designated and designated in the proper and complete performance of my designated and designated and designated and designated and designated and de	(Principal office street address)	
Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Starthub Virtual LLC ffice Address: 66 W Flagler Street, Suite 900. Miami. , Florida 33130 (Zip code) Registered agent's acceptance: (City) Registered agent and to accept service of process for the above stated corporation at the placesignated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity arther agree to comply with the provisions of all statutes relative to the proper and complete performance of my designated in the proper and complete performance of my designated and designated in the proper and complete performance of my designated in the pro	66 W Flagler Street, Suite 900, Miami, FL 33130	
Name: Starthub Virtual LLC Office Address: 66 W Flagler Street, Suite 900. Miami,	(Current mailing address, if different)	_
Name: Starthub Virtual LLC Office Address: 66 W Flagler Street, Suite 900. Miami,		
Miami. (City) (Zip code) Registered agent's acceptance: Inving been named as registered agent and to accept service of process for the above stated corporation at the placesignated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity arther agree to comply with the provisions of all statutes relative to the proper and complete performance of my described.	. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	
Miami. (City) (Zip code) Registered agent's acceptance: Inving been named as registered agent and to accept service of process for the above stated corporation at the placesignated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity arther agree to comply with the provisions of all statutes relative to the proper and complete performance of my described.	Name: Starthub Virtual I I C	
Miami. (City) (Zip code) Registered agent's acceptance: Inving been named as registered agent and to accept service of process for the above stated corporation at the placesignated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity arther agree to comply with the provisions of all statutes relative to the proper and complete performance of my described.	Name. <u>Starting Final 255</u>	•
Registered agent's acceptance: Inving been named as registered agent and to accept service of process for the above stated corporation at the placesignated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity arther agree to comply with the provisions of all statutes relative to the proper and complete performance of my a	office Address: 66 W Flagler Street, Suite 900.	·
Registered agent's acceptance: Inving been named as registered agent and to accept service of process for the above stated corporation at the placesignated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity arther agree to comply with the provisions of all statutes relative to the proper and complete performance of my a	Miami Florida 33130	
Registered agent's acceptance: Inving been named as registered agent and to accept service of process for the above stated corporation at the placesignated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity arther agree to comply with the provisions of all statutes relative to the proper and complete performance of my a	(City) (Zip code)	
. Registered agent's acceptance: laving been named as registered agent and to accept service of process for the above stated corporation at the pla esignated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity arther agree to comply with the provisions of all statutes relative to the proper and complete performance of my a		
esignated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity Arther agree to comply with the provisions of all statutes relative to the proper and complete performance of my a		e nlac
urther agree to comply with the provisions of all statutes relative to the proper and complete performance of my a	esignated in this application, I hereby accept the appointment as registered agent and agree to act in this ca	nacity.
Jew -	irther agree to comply with the provisions of all statutes relative to the proper and complete performance of	my di
	$\lambda = \Lambda$	

^{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: Philip Ophir Milman	☐ Chairman	Name: Eilon Milman
□Vice Chairman	Address: 35 Perrigo Court,	☐ Vice Chairman	Address: 631 St Germain Avenue,
Director	Maple, Ontario, Canada L6A 4W8	Director	North York, Ontario, Canada M5M 1X8
■ President		□President	
□Vice President		□ Vice President	
■ Secretary	■ Treasurer	■ Secretary	☐ Treasurer
□Other	Other	□Other	□Other
□Chairman	Name:	□Chairman	Name:
□Vice Chairman	Address:	□ Vice Chairman	Address:
Director		Director	
□President		□President	
□Vice President		□ Vice President	
☐ Secretary	☐Treasurer	☐ Secretary	☐ Treasurer
□Other	Other	Other	Other
□ Chairman	Name:	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: Undividuals may be	Use an attachment to report more than six (6). The an added to the index when filing your Florida Depute	nacharent will be imaged	d for reporting purposes only. Non-indexed port form.
12			
The officer or direc	Signature of Directo stor signing this document and who is listed in num lse information submitted in a document to the Dept	ber I I above) affirms th	at the facts stated herein are true and that he or tes a third degree felony as provided for in
13.	Philip Ophir Milma (Typed or printed name and capacity of pe	an - Director)



Transaction Number / Numéro de transaction: APP-A10360057550 Generated on: January 16, 2024, 14:01 / Généré le: 16 janvier 2024, 14:01



Ministry of Public and **Business Service Delivery** Ministère des Services au public et aux entreprises

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

MILMAN & COMPANY CHARTERED PROFESSIONAL ACCOUNTANTS (A PROFESSIONAL CORPORATION)

Corporation Name / Dénomination sociale

2144293

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 Public and Business Service Delivery.

The corporation came into existence on August 02, 2007 and has not been dissolved.

est, selon les dossiers électroniques du dossier du ministère des Services au public et aux entreprises, une société constituée, issue d'une fusion ou qui continue d'être exploitée en vertu des lois de la province de l'Ontario.

La société a vu le jour le 02 août 2007 et n'a pas été dissoute.

V. (Ruintarillall). Director / Directeur

Business Corporations Act / Loi sur les sociétés par actions

Certified a true copy of the record of the Ministry of Public and Business Service Delivery. V. Quintarilla W.

Director/Registrar



Copie certifiée conforme du dossier du ministère des Services au public et aux entreprises.

V. aluntarilla W.

Directeur ou registrateur