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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

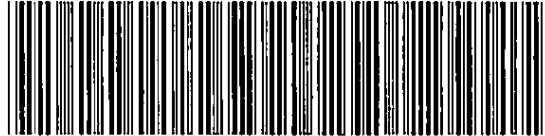
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** HET-X Capital Inc.

\_\_\_\_\_  
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:

Iva Morina

\_\_\_\_\_  
Name of Person

HET-X Capital Inc.

\_\_\_\_\_  
Firm/Company

225 Chabanel West, Suite #200

\_\_\_\_\_  
Address

Montreal, QC H2N2C9 CANADA

\_\_\_\_\_  
City/State and Zip code

i.morina@corwik.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Joseph W. Lawrence, II

at ( 954 ) 728-1270

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**MAILING ADDRESS:**

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

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$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.*

1. HET-X Capital 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. Canada 3. \_\_\_\_\_  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 12/05/2011 5. 98-1349601  
(Date of incorporation) (Date of duration, if other than perpetual)

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

7. 225 Chabanel West, Suite #200, Montreal, QC H2N2C9 Canada  
(Principal office street address)

225 Chabanel West, Suite #200, Montreal, QC H2N2C9 Canada  
(Current mailing address, if different)

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

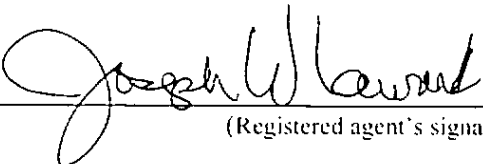
Name: Joseph W. Lawrence, II

Office Address: VLP Copenhaver Espino

350 E Las Olas Blvd., #1130, Fort Lauderdale , Florida 33301  
(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.

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: Hezi Twik  
☐ Vice Chairman Address: 199 Croissant Netherwood  
☐ Director Hampstead, QC H3X3H7, Canada  
☒ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: \_\_\_\_\_  
☐ Vice Chairman Address: \_\_\_\_\_  
☐ Director \_\_\_\_\_  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

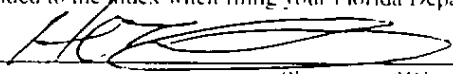
☐ Chairman Name: \_\_\_\_\_  
☐ Vice Chairman Address: \_\_\_\_\_  
☐ Director \_\_\_\_\_  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: \_\_\_\_\_  
☐ Vice Chairman Address: \_\_\_\_\_  
☐ Director \_\_\_\_\_  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: \_\_\_\_\_  
☐ Vice Chairman Address: \_\_\_\_\_  
☐ Director \_\_\_\_\_  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: \_\_\_\_\_  
☐ Vice Chairman Address: \_\_\_\_\_  
☐ Director \_\_\_\_\_  
☐ President \_\_\_\_\_  
☐ 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. Hezi Twik, President  
(Typed or printed name and capacity of person signing application)

# Certificat d'attestation

Loi sur la publicité légale des entreprises (RLRQ, chapitre P-44.1)

J'atteste que l'entreprise portant le nom

HET-X CAPITAL INC.

- est immatriculée au registre des entreprises depuis le 5 décembre 2011.
- n'est pas en défaut de déposer une déclaration de mise à jour annuelle.
- n'est pas en défaut de se conformer à une demande qui lui a été faite en vertu de l'article 73.
- n'a pas transmis au Registraire une déclaration, un avis ou un jugement indiquant qu'elle est en voie de liquidation ou de dissolution.
- n'est pas radiée au registre des entreprises

Numéro de certification : 335457672

Le numéro de certification ci-dessus vous permet de consulter ce document certifié à l'aide du service en ligne Vérifier un numéro de certification du Registraire des entreprises pour une période de 90 jours suivant sa délivrance.

Fait le 18 décembre 2023 pour le numéro  
d'entreprise du Québec 1167836478.

  
Registraire des entreprises



## Certificate of status

Act respecting the legal publicity of enterprises (RLRQ, Chapter P-44.1)

I certify that the company bearing the name:

HET-X CAPITAL INC.

- Has been registered in the Registre des entreprises since December 5, 2011.
- Is not in default of filing an annual updating declaration.
- Has not failed to comply with any request made under Section 73.
- Has not filed with the Registraire a declaration, a notice or a judgment indicating that it is in the process of liquidation or dissolution.
- Its registration has not been cancelled.

Certificate of status number: 335457672

The above certification number allows you to access this certified document using the verify a certification number online service of the Registraire des entreprises "Vérifier un numéro de certification" for a period of 90 days following its issuance.

Issued on December 18, 2023 for the Quebec  
Company number 1167836478.

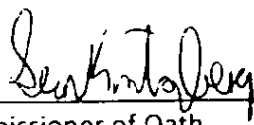
*Signature*  
Registraire des entreprises

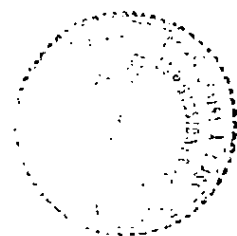
*Seal and logo*  
Registraire des entreprises  
Québec

Services Québec

"I hereby swear that the foregoing translation of the Certificate is true and correct."

BEFORE ME, the undersigned authority, personally appeared Gessie Alexandre, who acknowledged before me by means of physical presence, first being duly sworn, acknowledged that she provided the true and correct translation of the Certificate. WITNESS my hand and official seal this 19th day of December, 2023.

  
\_\_\_\_\_  
Commissioner of Oath



*Revised 14/23*

*Leon Kruttsberg*