

F24000005068

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(Address)

(City/State/Zip/Phone #)

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Brumbley



CSC - Tallahassee  
1201 Hays Street  
Tallahassee, FL 32301-2607  
850-558-1500, Ext: x61563

To: Department Of State, Division Of Corporations  
From: Shauna Godbolt  
Ext: x61563  
Date: 09/23/24  
Order #: 1624352-1  
Re: 9524-5239 Quebec Inc.  
Processing Method: Routine

A handwritten signature in black ink, appearing to read "Shauna Godbolt", is written over a horizontal line.

TO WHOM IT MAY CONCERN:

Enclosed please find:

Application for Certificate of Authority  
Amount to be deducted from our State Account: \$87.50 - FL State Account Number:  
120000000195  
Certificate of Good Standing from State of Incorporation

Please take the following action:

File in your office on basis  
Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** 9524-5239 Quebec 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:

Alissia De Grazia

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

Levy Salis LLP

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

2047 Mansfield St., 3rd Floor

\_\_\_\_\_  
Address

Montreal, Quebec, H3A 1Y7, Canada

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

adegrazia@levyialis.com

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

For further information concerning this matter, please call:

Alissia De Grazia

at ( 514 ) 940-8078

\_\_\_\_\_  
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. 9524-5239 Quebec 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. Quebec, Canada 3. 98-1810228  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. September 10, 2024 5. \_\_\_\_\_  
(Date of incorporation) (Date of duration, if other than perpetual)

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

7. 489 Lakeshore Rd., Beaconsfield, Quebec, H9W 4J6, Canada  
(Principal office street address)

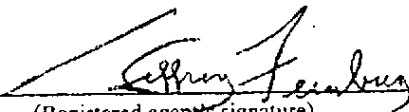
\_\_\_\_\_  
(Current mailing address, if different)

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

Name: Jeffrey Feinberg, Esq.  
Office Address: 4651 Sheridan Street, Suite 200  
Hollywood, Florida 33021  
(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):

2024 SEP 23 PM 3:06

**A. DIRECTORS**

☐ Chairman Name: Francois Dalphond  
☐ Vice Chairman Address: 489 Lakeshore Rd.  
☒ Director Beaconsfield, Quebec, H9W 4J6, Canada  
☒ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☒ Secretary ☒ Treasurer  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

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

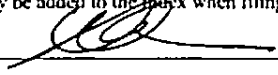
☐ Chairman Name: \_\_\_\_\_  
☐ Vice Chairman Address: \_\_\_\_\_  
☐ Director \_\_\_\_\_  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ 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. Francois Dalphond, 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

9524-5239 Québec inc.

- est immatriculée au registre des entreprises depuis le 10 septembre 2024.
- 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 : 669266415

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 17 septembre 2024 pour le numéro d'entreprise du Québec 1180169121.



Registraire des entreprises



## CERTIFICATE OF ATTESTATION

An Act respecting the legal publicity of enterprises (CQLR, c. P-44.1)

I attest that the enterprise bearing the name

9524-5239 Québec inc.

- is registered at the enterprise registrar since September 10, 2024
- Is not in default of filing an annual update declaration.
- is not in default to comply with a request that was made under section 73.
- has not filed with the Registrar a declaration, a notice, or a judgment that it is being liquidated or dissolved.
- is not struck off the enterprise registrar.

Certification number: 669266415

The above certification number allows you to consult this certified document using **the** online service "**Check a certification number**" of the Enterprise Registrar for a period of 90 days from the date of **issuance**.

Issued September 17<sup>TH</sup>, 2024, for the  
Quebec enterprise number 1180169121.

(s) Yves Pepin  
Enterprise Registrar

SEAL OF  
Government of Quebec  
Enterprise Registrar