

Florida Department of State
F2S 000005713
 Division of Corporations
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JULIA V. F. SMITH
FALL HAVEN, FLORIDA

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**FOREIGN PROFIT/NONPROFIT CORPORATION
 INCOM MANUFACTURING GROUP INC.**

Certificate of Status	0
Certified Copy	0
Page Count	03
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Electronic Filing Menu

Corporate Filing Menu

Help

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October 8, 2025

FLORIDA DEPARTMENT OF STATE
Division of Corporations

RASI 5

SUBJECT: INCOM MANUFACURING GROUP INC.
REF: W25000138633

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refax this document until the quality has been improved.

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Karen A Saly
Regulatory Specialist II

FAX Aud. #: H25000356757
Letter Number: 225A00022765

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.*

INCOM MANUFACTURING GROUP INC.

1. _____
(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. _____ 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 06/15/1994 5. Perpetual
(Date of incorporation) (Date of duration, if other than perpetual)

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

7. 3829 Forest Parkway, Suite 800 Wheatfield, NY 14120
(Principal office address)
- 1259 Sandhill Drive, Ancaster, Ontario L9G 4V5
(Current mailing address, if different)

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

Name: Registered Agent Solutions, Inc.

Office Address: 1200 South Pine Island Road

Plantation, 33324
(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.

Naomi Ostapowicz, Asst. Sec. on behalf of Registered Agent Solutions, 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.

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11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Cyril W Dicks

Address: 1259 Sandhill Drive, Ancaster, Ontario L9G 4V5

Vice Chairman:

Address:

Director:

Address:

Director:

Address:

B. OFFICERS

President: Cyril W Dicks

Address: 1259 Sandhill Drive, Ancaster, Ontario L9G 4V5

Vice President:

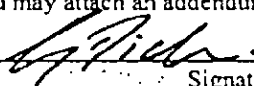
Address:

Secretary:

Address:

Treasurer:

Address:

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.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. Cyril W Dicks

(Typed or printed name and capacity of person signing application)

STATE OF NEW YORK

DEPARTMENT OF STATE

Certificate of Status

I, WALTER T. MOSLEY, Secretary of State of the State of New York and custodian of the records required by law to be filed in my office, do hereby certify that upon a diligent examination of the records of the Department of State, as of the date and time of this certificate, the following entity information is reflected:

Entity Name:	INCOM MANUFACTURING GROUP INC.
DOS ID Number:	1829096
Entity Type:	DOMESTIC BUSINESS CORPORATION
Entity Status:	EXISTING
Date of Initial Filing with DOS:	06/15/1994
Statement Status:	Current
Statement Due Date:	06/30/2026

No information is available from this office regarding the financial condition, business activity or practices of this entity.



WITNESS my hand and official seal of the Department of State,
at the City of Albany, on October 06, 2025 at 09:06 A.M.

WALTER T. MOSLEY
Secretary of State

BRENDAN C. HUGHES
Executive Deputy Secretary of State