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(((H14000289933 3)))



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To:

Division of Corporations

Fax Number : (850) 617-6381

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone

: (850)222-1092

Fax Number

: (850) 878-5368

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

Email	Address:		

FLORIDA PROFIT/NON PROFIT CORPORATION

CDN Realty GP Inc.

Certificate of Status	0
Certified Copy	1
Page Count	945
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12/17/2014 10:47:54 From: To: 8506176381

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December 17, 2014

FLORIDA DEPARTMENT OF STATE
Division of Corporations

C T CORPORATION SYSTEM

SUBJECT: CDN REALTY GP INC.

REF: W14000074933

date of suprincipal 12/16

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 registered agent must sign accepting the designation.

A person must sign for the company listed as the Registered Agent.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

If you have any further questions concerning your document, please call (850) 245-6052.

Maryanne Dickey Regulatory Specialist II New Filing Section FAX Aud. #: H14000289933 Letter Number: 714A00026648 A DEC 17 AH 10: 55

COVER LETTER

Department of State New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: CON RI	EALTY OP INC.		
SOBJECT:	(FROFOSED CORPOR	TE NAME - MUST INCL	UDRSURAN
Enclosed are an orig	linal and one (1) copy of the ar	ticles of incorporation an	d a check for:
S70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee &: Certified Copy	S87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL CO	PY REQUIRED
FROM:	k Di Re Nam D LIENART ST., APT. #2	e (Printed or typed)	
	<u></u>	Address	
ST.	LEONARD, QUEBEC, PQ H1S 1V	V6 CANADA	
***	Clty,	State & Zip	
514-	591-6021		
	Daytime 1	elephone number	
info(@innobilisdire.com		
	E-mail address: (to be use	d for future annual report i	iotitication)

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION 1a compliance with Chapter 607 und/or Chapter 621, F.S. (Profit)

			14 U
			DEC 1
		INCORPORATION 17 und/or Chapter 621, F.S. (Profit)	55mg B
ARTICLE I A	GAME CON REALTY OF INC.	,	و الرح
ARTICLE II I	Principal OFFICE Principal <u>street</u> address	Mailing address. It	Fdifferent las
7180 LIENART ST	., APT. #2	· · · · · · · · · · · · · · · · · · ·	
ST. LEONARD, QI	JEBEC, PQ IIIS IW6 CANADA		
ARTICLE III P The purpose for whi United States and th	to engine to engine the corporation is organized is: to engine the corporation is organized is:	nge in any activity or business permitted t	inder the laws of tho
ARTICLE IV S The number of share: ARTICLE V I			
Name and T	Nick Di Re. President	Nume and Title:	
Address	7180 Lienart ST., APT. #2	Address:	
Address	ST-LEONARD, PQ HIS 1W6	- Austes.	
	CANADA		
Name and T	ue:	Name and Title:	
Address		Address:	
Name and Ti		Name and Title:	
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Name	and Title:	Name and Title:	·
Addre		Address:	ille s
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		<u></u>	85.
			- 1821 - 5
ARTICLE VI		Pol Amerika sama las	77
i de <u>úsitie nuo</u>	Florida street address (P.O. Box NOT acceptable) a C T Corporation System	। तक प्रतीवस्थान इसिस्पर (३:	9: 5 1.081
Name:		•	⊕# 9
Address:	1200 South Pine Island Road	_	, .
	Plantation, PL 33324	_	
ARTICLE VII	INCORPORATOR		
The name and s	address of the Incorporator is:		
Name:	Courtney Scanion - c/o Hodgson Russ LLP		
Address:	140 Pearl Street, Suite 100	•	
	Buffelo, NY 14202	•	
Haviva kasa wa	med as registered agent to occept service of process	Can she above existed engineers on a	t dha afa aa daabaaadad ba
this certificate, i	am familiar with and accept the appointment as reg	istered agent and agree to act in thi	s capacity
By:	C T Corporation System		2/16/2014
 	Required Signature/Registered Agent		Date
l submit this do	cument and affirm that the facts stated herein are	true. I am aware that the fatse info	ormation submitted in a
aocsument to the	Pepartment of State constitutes a third degree felorg	y as provided for in 3.61 /.135, F.S.	
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