## P21000029938

	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PiCk-U	MAIL MAIL
<del> </del>	(Business Entity Name)
· · · · · · · · · · · · · · · · · · ·	(Document Number)
Centified Copies	Certificates of Status
Special Instruction	s to Filing Officer





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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I20000000195  REFERENCE : 740028 7545742	
AUTHORIZATION: Spelle Reman	
COST LIMIT : \$ 70.00	
ORDER DATE: March 31, 2021	
ORDER TIME : 11:57 AM	
ORDER NO. : 740028-005	
CUSTOMER NO: 7545742	
DOMESTIC FILING	
NAME: MAROTECH USA INC.	
l e e e e e e e e e e e e e e e e e e e	
EFFECTIVE DATE:	
XX ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP ARTICLES OF ORGANIZATION	
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:	
CERTIFIED COPY  XX PLAIN STAMPED COPY  CERTIFICATE OF GOOD STANDING	
CONTACT PERSON: Eyliena Baker - EXT.	

EXAMINER'S INITIALS:

## **COVER LETTER**

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

SUBJECT:	MAROTECH USA INC.		
Enclosed are an orig	ginal and one (1) copy of the arti	cles of incorporation and	d a check for:
□ \$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	□ \$87.50 Filing Fee, Certified Copy & Certificate o Status  PY REQUIRED
FROM:	CAITLIN DELANEY Name	(Printed or typed)	
	10 EAST 40 <sup>TH</sup> STREE	T. SUITE 3310	
	/	Address	
	NEW YORK, NY 100	16	
	City,	State & Zip	<u></u>
	(212) 687-1155		
	Daytime T	elephone number	
	cfrank@nilsonlaw.com		
	E-mail address: (to be used	I for future annual report r	notification)

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

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

RTICLE II PRINCIPAL OFFICE		
Principal street address	Mailing address, if different is	:
100 RUE DE NAPLES, ST-AUGUSTIN-DE-DESMA	AURES.	
QC, CANADA G3A2Y2		
RTICLE III PURPOSE		1
ne purpose for which the corporation is organized is: _t	o engage in any lawful act or activity for which corporati	ons may
organized under the Florida Business Corporation Act		!
		<u>:</u> _
		—
		<u> </u>
DOMESTIC ALL AND		I
		_
te number of shares of stock is:2000		
ne number of shares of stock is:2000		ر ا
re number of shares of stock is:2000	TORS	-
RTICLE V INITIAL OFFICERS AND/OR DIRECTION Name and Title: Martin Robitaille, Pres., Dir.,	TORS	9: <u>-</u> 0
re number of shares of stock is:2000	TORS	9: <u>-</u>
Name and Title: Martin Robitaille, Pres., Dir.,  100 rue de Naples	Treas. Name and Title:Address:	9: <u>-</u>
Name and Title: Martin Robitaille, Pres., Dir.,  Address 100 rue de Naples	Treas. Name and Title:Address:	9: <u>-</u>
Name and Title: Martin Robitaille, Pres., Dir.,  Address  St-Augustin-de-Desmaures, C	Treas. Name and Title:Address:	9: <u>-</u>
Name and Title: Martin Robitaille, Pres., Dir.,  Address  St-Augustin-de-Desmaures, C	Treas. Name and Title:Address:	, ,
Name and Title: Martin Robitaille, Pres., Dir.,  Address  St-Augustin-de-Desmaures, C  CANADA G3A2Y2	Treas. Name and Title:Address:    Name and Title:Name and Title:	
Name and Title: Martin Robitaille, Pres., Dir.,  100 rue de Naples  St-Augustin-de-Desmaures, C  CANADA G3A2Y2  Name and Title: Emily Ayoob, Secretary	Treas. Name and Title:Address:    Name and Title:Name and Title:	
Name and Title: Martin Robitaille, Pres., Dir.,  Address  St-Augustin-de-Desmaures, C  CANADA G3A2Y2  Name and Title: Emily Ayoob, Secretary  Address  10 East 40th Street, Suite 33	Treas. Name and Title:Address:    Name and Title:Name and Title:	
Name and Title: Martin Robitaille, Pres., Dir.,  Address  St-Augustin-de-Desmaures, C  CANADA G3A2Y2  Name and Title: Emily Ayoob, Secretary  Address  10 East 40th Street, Suite 33	Treas. Name and Title:Address:    Name and Title:Name and Title:	
Name and Title: Martin Robitaille, Pres., Dir.,  Address  St-Augustin-de-Desmaures, C  CANADA G3A2Y2  Name and Title: Emily Ayoob, Secretary  Address  10 East 40th Street, Suite 33	Treas. Name and Title:  Address:  Name and Title:  Address:  Address:	

Name and '	l'itle:	Name and Title:	
Address		Address:	<u>.</u>
	-		<del></del>
	EGISTERED AGENT ida street address (P.O. Box NOT acceptabl	o vof the respictance agent is:	
Name:	CORPORATION SERVICE COMPANY		
Address:	1201 Hays Street		
-	Tallahassee, FL 32301	<u></u>	
ARTICLE VII - IN	SCORPORATOR		
	ress of the Incorporator is:		
Name:	Çaitlin Delaney		
Address:	10 East 40th Street, Suite 3310		
	New York, NY 10016		
ARTICLE VIII E	F <u>FECTIVE D</u> ATE:		
(If an effective dat	her than the date of filing:e is listed, the date must be specific and ca	(OPTIONAL) innot be more than five days prior or 90 days	s after t
	serted in this block does not meet the applic ective date on the Department of State's reco	able statutory filing requirements, this date will rds.	not be l
	niliar with and accept the appointment as reg	ess for the above stated corporation at the place of istered agent and agree to act in this capacity	lesignat
	Justide & Blum	04/01/202	1
	Required Signature/Registered Agent		Date
	nent and affirm that the facts stated herein partment of State constitutes a third degree f	are true. I am aware that the false information as provided for in s.817.155, F.S.	n submi
	$A \cap A$	03/31/20	224

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