



**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** 1000124691 ONTARIO 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:

Samantha Wu

Name of Person

Altro LLP

Firm/Company

155 University Avenue, Suite 300

Address

Toronto, Ontario, M5H 3B7

City/State and Zip code

swu@altrolaw.com

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

For further information concerning this matter, please call:

Samantha Wu

at ( 416 ) 477-8157

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

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 DEPARTMENT OF STATE  
 TALLAHASSEE FL

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. 1000124691 ONTARIO 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. February 23, 2022 5.
(Date of incorporation) (Date of duration, if other than perpetual)

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

7. 7901 4th St N, Ste 300, St. Petersburg, Florida, 33702
(Principal office street address)
927 Hemlock Drive, Milton, Ontario, Canada, L9T 3X5
(Current mailing address, if different)

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

Name: Northwest Registered Agent LLC

Office Address: 7901 4th St N, Ste 300

St. Petersburg, Florida 33702
(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.

/s/ Tom Glover

(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: Louis DUROCHER  
 Vice Chairman Address: 193 Erindale Crescent  
 Director Cambridge, Ontario  
 President Canada, N3C 3E6  
 Vice President \_\_\_\_\_  
 Secretary  Treasurer  
 Other \_\_\_\_\_  Other \_\_\_\_\_

Chairman Name: Michele Theresa FALKINS  
 Vice Chairman Address: 927 Hemlock Drive  
 Director Milton, Ontario, Canada, L9T 3X5  
 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 \_\_\_\_\_

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**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. /S/ Louis DUROCHER  
 \_\_\_\_\_  
 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. Louis DUROCHER, President of 1000124691 ONTARIO INC.  
 \_\_\_\_\_  
 (Typed or printed name and capacity of person signing application)



Ministry of Government and  
Consumer Services  
Ministère des Services gouvernementaux et  
des Services aux consommateurs

## Certificate of Status

## Attestation du statut juridique

Business Corporations Act

Loi sur les sociétés par actions

This is to certify that

La présente vise à attester que

1000124691 ONTARIO INC.

Corporation Name / Dénomination sociale

1000124691

Ontario Corporation Number / Numéro de société de l'Ontario

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is a corporation incorporated, amalgamated or continued  
under the laws of the Province of Ontario according to the  
electronic records maintained by the Ministry of  
Government and Consumer Services.

est une société constituée en personne morale, fusionnée  
ou maintenue conformément aux lois de la province de  
l'Ontario, selon les dossiers électroniques tenus par le  
ministère des Services gouvernementaux et des Services  
aux consommateurs.

The corporation came into existence on February 23, 2022  
and has not been dissolved.

La société a vu le jour le 23 février 2022  
et n'a pas été dissoute.

Director / Directeur

Business Corporations Act / Loi sur les sociétés par actions

Certified a true copy of the record of the  
Ministry of Government and Consumer Services.

Director/Registrar



Copie certifiée conforme du dossier du  
ministère des Services gouvernementaux et des  
Services aux consommateurs.

Directeur ou registrateur