## F23000001704

(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
,
(Document Number)
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MAR 2 3 2023 K. Brumbtey 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500 ACCOUNT NO. : I2000000195 REFERENCE : 603069 4304851 AUTHORIZATION : COST LIMIT : \$ 70.00 ORDER DATE: March 21, 2023 ORDER TIME : 4:57 PM ORDER NO. : 603069-015 CUSTOMER NO: 4304851 FOREIGN FILINGS NAME: CLINTON LANDS GP INC. XXXX QUALIFICATION (TYPE: CO) PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: \_\_\_\_ CERTIFIED COPY XX PLAIN STAMPED COPY \_\_\_\_\_ CERTIFICATE OF GOOD STANDING

EXAMINER: \_\_\_\_

CONTACT PERSON: Eyliena Baker -- EXT#

CORPORATION SERVICE COMPANY

## **COVER LETTER**

TO:	: Registration Section Division of Corporations								
CHDI		CLINTON LANDS GP INC.							
20B1	LCI:		Name o	n - mu	must include suffix				
Dear Si	ir or M	adam:							
"Certifi	icate of		"Certificate	of Good Sta	nding'	' and check are subt	et Business in Florida," mitted to register the		
Please	return a	all corresponde	nce concernii	ng this matte	r to th	e following:			
STEVE	GEAN	GU							
				Name of	Perso	n			
GOULS	STON 8	& STORRS PC							
-		-	·	Firm/Co	npany				
400 AT	LANTI	C AVENUE							
				Add	ress				
BOSTO	N, MA	02110							
			<del></del> -	City/State	and Zi	p code			
SGEAN	vGU@0	GOULSTONSTO				•			
		E-	mail address	(to be used	for fu	ture annual report n	otification)		
For fur	ther inf	ormation conc	eming this m	atter, please	call:				
STEVE	GEAN	GU		617	· 5	74-4186 Daytime Teleph			
	Name	e of Person		Area Co	de	Daytime Teleph	none 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			
Enclose Please n □ \$70.	nake ch	check for the force to: I ng Fee	ollowing amo FLORIDA DE \$78.75 Filing Certificate o	PARTMEN g Fee &	□ \$78	STATE 5.75 Filing Fee & rtified Copy	S87.50 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.

•	able in Florida, enter alternate corporate name ac					
2. DELAWARE  (State or country under the law of which it is incorporate		3. application in process (FEI number, if applicable)				
·(Date	of incorporation) 5	(Date of duration, if other than pe	emetual)			
			petaar,			
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.150	Florida, if prior to registration)	<del>-</del>			
	(020 020 110112 01111101 01 011111101	<u></u>				
c/o Corporation S	ervice Company, 251 Little Falls Drive, Wilmin					
	•	street address)	2			
351 King Street	East, 13th floor, Suite 1300, Toronto, Ontario, C					
	(Current mailing	address, if different)	3			
Name and stree	et address of Florida registered agent: (P.O.	Box NOT acceptable)	823 <b>水果</b> 23			
	Corporation Service Company	,	 Ā.			
Name:			- 00			
ffice Address:	1201 Hays Street		<u> </u>			
	Tallahassee	, Florida 32301 (Zip code)				
	(City)	(Zip code)				

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.

(Registered agent's signature)

A. DIRECTORS								
□ Chairman	Name: William Tresham	□Chairman	Name:					
□Vice Chairman	Address:	□Vice Chairman						
□Director	13th floor, Suite 1300	□Director						
□President	Toronto, Ontario, Canada M5A 0L6	President	Toronto, Ontario, Canada M5A 0L6					
□Vice President		□Vice President						
Secretary	□Treasurer	☐ Secretary	□Treasurer					
CEO CEO		□Other	Other					
□Chai⊓nan	Thomas Griffiths	□Chairman	Michael Kirchmair					
□Vice Chairman	Name:351 King Street East	□Vice Chairman □Director □President	351 King Street East Address:					
_ , ,	Address:		13th floor, Suite 1300					
☐ Director ☐ President	Toronto, Ontario, Canada M5A 0L6		Toronto, Ontario, Canada M5A 0L6					
□Vice President		□Vice President						
■ Secretary	□Treasurer	□Secretary	<b>■</b> Treasurer					
□Other	Other	Other	Other					
	Name:	□Chairman	Name:					
□ Chairman		□Vice Chairman						
	Address:							
Director		□Director						
□President		□President _						
□Vice President		□Vice President						
□ Secretary	□Treasurer	☐Secretary	☐ Treasurer					
Other		□Other	Other					
Important Notice: I individuals may be	Use an attachment to report more than six (6). The attact added to the index when filing your Florida Department	nt of State Annual Re	d for reporting purposes only. Non-indexed sport form.					
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.								
THOMAS GRIFFITHS, Treasurer								

Page 1

## Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "CLINTON LANDS GP INC." IS DULY

INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS

OF THIS OFFICE SHOW, AS OF THE TWENTY-SECOND DAY OF MARCH, A.D.

2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CLINTON LANDS GP INC." WAS INCORPORATED ON THE TWENTY-FIRST DAY OF MARCH, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL FRANCHISE TAXES HAVE BEEN ASSESSED TO DATE.



Jeffrey W. Bullock, Secretary of State

Authentication: 202979379