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SECRETARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: TAYCO OFFICE FU	JRNISHINGS INC.			
Sobster.	Name of corporation	- must include suffix		
Dear Sir or Madam:				
The enclosed "Application by For "Certificate of Existence," or "Ce above referenced foreign corporations."	rtificate of Good Stan	ding" and check are subn		
Please return all correspondence of	concerning this matter	to the following:		
NAOKO STAIOS				
	Name of	Person		
TAYCO OFFICE FURNISHINGS I	NC.			
	Firm/Con	pany		
400 NORRIS GLEN RD.				
	Addre	288		
TORONTO, ONTARIO M9C 1H5				
	City/State a	nd Zip code		
naoko@tayco.com		····		
E-mail	address: (to be used t	or future annual report no	otification)	
For further information concerning	g this matter, please c	all:		
NAOKO STAIOS	416	253-2528	Daytime Telephone Number	
Name of Person	Area Code	Daytime Teleph	one Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		Registration Se Division of Co P.O. Box 6327	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
-	UDA DEPARTMENT	OF STATE 3 \$78.75 Filing Fee & Certified Copy	■ \$87.50 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.

l	CE FURNISHINGS INC.		<u> </u>
	corporation; must include "INCORPORATED, orp.," "Inc.," "Co.," or "Corp.")	," "COMPANY," "CORPORATION,"	
(If name unavail	able in Florida, enter alternate corporate name	adopted for the purpose of transacting busin	ess in Florida)
ONTARIO, CA	NADA		
(State or countr	y under the law of which it is incorporated)	(FEI number, if applicable	
4. SEPTERMBER 13, 2022		ERPETUAL.	
(Date of incorporation)		(Date of duration, if other than perpetual)	
400 NORRIS GL	(Date first transacted business it (SEE SECTIONS 607.1501 & 607.1 EN RD. TORONTO ONTARIO M9C 1H5	n Florida, if prior to registration) 502, F.S., to determine penalty liability)	
			
	(Principal off	ice <u>street</u> address)	
	(Current mailir	ng address, if different)	
. Name and stree Name: Office Address:	et address of Florida registered agent: (P.C STEPHANI HEIRSHBERG 7216 N. HIGHLAND AVE.	D. Box <u>NOT</u> acceptable)	ت
	ТАМРА	, Florida	SECRETAR DIVISION OF C
	(City)	(Zip code)	7
laving been nam esignated in this arther agree to c	ent's acceptance: sed as registered agent and to accept service application, I hereby accept the appoints comply with the provisions of all statutes r with and accept the obligations of my po (Registered agent's si	ice of process for the above stated corpo nent as registered agent and agree to ac relative to the proper and complete perfo sition as registered agent.	Si → Signation at the misse
∩ Attackadia -	(Kegistered agent's si	gnature)	
ne Department of	ertificate of existence duly authenticated, State, by the Secretary of State or other of	not more than 90 days prior to delivery	of this application

the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction

^{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: William (Bill) Melnik	□ Chairman	Name:		
□Vice Chairman	Address:	□Vice Chairman	Address:		
□Director	Alton, Ontario	□Director			
□President	L7K 1M9	□President			
□Vice President	Canada	□Vice President			
☐ Secretary	□Treasurer	☐ Secretary	☐ Treasurer		
□Other	Other	□Other	□Other		
□Chairman	Name:	□ Chairman	Name:		
□Vice Chairman	Address:	□ Vice Chairman	Address:		
□Director		□Director			
□President		□President			
□Vice President		□Vice President			
□Secretary	□Treasurer	☐ Secretary	□Treasurer		
Other	□Other	□Other			
□Chairman	Name:	□ Chairman	Name:		
□Vice Chairman	Address:	□Vice Chairman	Address:		
□Director		□Director			
□President		□President			
□Vice President		□ Vice President			
☐ Secretary	□Treasurer	□Secretary	□Treasurer		
□Other	Other	Other	□Other		
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. 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.



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

Certificate of Incorporation

Certificat de constitution

Business Corporations Act

Loi sur les sociétés par actions

TAYCO OFFICE FURNISHINGS INC.

Corporation Name / Dénomination sociale

1000310496

Ontario Corporation Number / Numéro de société de l'Ontario

This is to certify that these articles are effective on

La présente vise à attester que ces statuts entreront en vigueur le

September 13, 2022 / 13 septembre 2022

V. Quintanilla W.

Business Corporations Act / Loi sur les sociétés par actions

The Certificate of Incorporation is not complete without the Articles of Incorporation.

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

V. Quindanilla W.

Director/Registrar



Le certificat de constitution n'est pas complet s'il ne contient pas les statuts constitutifs.

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

V. Quintarilla W.

Directeur ou registrateur