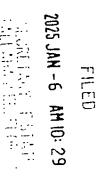
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(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
W25-2015 Genally Office Use Only				
Office Use Only				



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01/07/25--01003--003 **70.00



01/24/25--01015--025 **450.00

JAN 25 2025 K. Brumbley



FLORIDA DEPARTMENT OF STATE Division of Corporations

Corrected

Please use

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January 7, 2025

CORPORATE ACCESS, INC.

SUBJECT: GATEKEEPER SYSTEMS USA INC.

Ref. Number: W25000002015

We have received your document for GATEKEEPER SYSTEMS USA INC. and the authorization to debit your account in the amount of \$70.00. However, the document has not been filed and is being returned for the following:

Pursuant to section 607.1502(4), 617.1502(4) or 605.0904(7), Florida Statutes, this entity is liable for a civil penalty of at least \$500 but not more than \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification. In addition to this civil penalty, the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state are also due. The amount due this office to cover both annual report(s) and penalty fees is \$450.00.

The total amount due is \$520.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly Regulatory Specialist II

Letter Number: 125A00000404

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.

der the law of which it is incorporated)	dopted for the purpose of transact 36-4893515 (FEI number, if a	ing business in Florida)		
3. der the law of which it is incorporated)	36-4893515 (FEI number, if a			
3. der the law of which it is incorporated)	36-4893515 (FEI number, if a			
der the law of which it is incorporated)	(FEI number, if a	applicable)		
5	(Date of duration, if other			
ncorporation)	(Date of duration, if other			
		(Date of duration, if other than perpetual)		
(Date first transacted business in (SEE SECTIONS 607.1501 & 607.1501		ility)		
Circle East, Bristol, PA. 19007				
(Principal office	e <u>street</u> address)			
Ave. Abbotsford, British Columbia, Canada	a. V2T 6H1			
		APPROVED AND FILED 2025 JAN - 6 AN IO: 1.CORE IN THE FILE FILE FILE FILE FILE FILE FILE FIL		
894 Remington Green Ln., Suite A				
allahassee	Florida 32308			
(City)	(Zip code)	29		
plication, I hereby accept the appointmoly with the provisions of all statutes re th and accept the obligations of my pos	ent as registered agent and ag clative to the proper and comp cition as registered agent.	ree to act in this capacity. I lete performance of my dutio		
	(SEE SECTIONS 607.1501 & 607.150 Circle East, Bristol, PA. 19007 (Principal office Ave. Abbotsford, British Columbia, Canada (Current mailing dress of Florida registered agent: (P.O. Registered Agent Solutions Inc. 894 Remington Green Ln., Suite A allahassee (City) s acceptance: as registered agent and to accept service oblication, I hereby accept the appointment of with the provisions of all statutes reth and accept the obligations of my possible accept the obligations of my po	(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liabilization of the control of th		

under the law of which it is incorporated.

A. DIRECTORS				
□Chairman	Name: Douglas Dyment	□Chairman	Name:	
□Vice Chairman	Address: #301-31127 Wheel Ave	□Vice Chairman	Address:	
Director	Abbotsford, British Columbia, Canada	□Director		
President	V2T 6H1	□President		
□Vice President		□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	□Treasurcr	☐ 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		Other
individuals may be	Use an attachment to report more than six (6). The attace added to the index when filing your Florida Denartme	nt of State Annual R	.eport form.	urposes only. Non-indexed
The officer or dis-	Signature of Director of contract of contr		hat the facts state	d herein are true and that he or
she is aware that fi s.817.155, F.S.	alse information submitted in a document to the Depart	ment of State constit	utes a third degre	e felony as provided for in
13.	President		<u> </u>	

Page 1



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

DELAWARE, DO HEREBY CERTIFY "GATEKEEPER SYSTEMS USA 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 SIXTH DAY OF JANUARY, A.D. 2025.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GATEKEEPER SYSTEMS USA INC." WAS INCORPORATED ON THE FIRST DAY OF MARCH, A.D. 2018.

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



Authentication: 202622560

Date: 01-06-25