



DEPARTMENT OF FINANCIAL INSTITUTIONS

To All to Whom These Presents Shall Come, Greeting:

I, Patti Epstein, Administrator, Division of Corporate and Consumer Services, Department of Financial Institutions, do hereby certify that the annexed copy has been compared by me with the record on file in the Corporation Section of the Division of Corporate & Consumer Services of this department and that the same is a true copy thereof and the whole of such record; and that I am the legal custodian of said record, and that this certification is in due form.



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the official seal of the Department.

*Patti Epstein*

PATTI EPSTEIN, Administrator Division of  
Corporate and Consumer Services  
Department of Financial Institutions

Date: May 26, 2020

*DeLou Wilson*  
By: DeLou Wilson

RECEIVED

OK

Sec. 180.1503  
Wis. Stats. OCT 14 2010

State of Wisconsin  
WISCONSIN DEPARTMENT OF FINANCIAL INSTITUTIONS  
DFI Division of Corporate & Consumer Services



**FOREIGN BUSINESS CORPORATION – CERTIFICATE OF AUTHORITY APPLICATION**

Indicate (X) below if the application is for a (A) ORIGINAL or (B) for an AMENDED certificate.

1. A.  ORIGINAL certificate

Name of Corporation <u>AQUILA RESOURCES USA, INC.</u>	2. State or Country of Incorporation <u>MICHIGAN</u>
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1.B.  AMENDED certificate (Enter the corporate name, state or country of organization, and date of incorporation, as changed or continued.) Complete all other items, except items 8, and 12 thru 14.

Previous Name of Corporation (name under which it is currently registered in WI)	2. State or Country of Incorporation
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New or Continuing Name of Corporation	2. State or Country of Incorporation
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3. Date of Incorporation (MM/DD/YYYY) <u>03/26/2004</u>	4. Does the corporation have <u>perpetual</u> existence? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No, organized for a duration of _____ years
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5. Name of Registered Agent in Wisconsin <u>NORTHWEST REGISTERED AGENT, LLC.</u>
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6. Street address of Registered Office in Wisconsin <u>901 S. WHITNEY WAY</u>		
City <u>MADISON</u>	State <u>WI</u>	Zip/Postal code <u>53711</u>

7. Address of Principal Office <u>E807 GERUE STREET</u>			
City <u>STEPHENSON</u>	State/Province <u>MI</u>	Country <u>USA</u>	Zip/Postal code <u>49887</u>

8. Has the corporation transacted business in Wisconsin without holding a Certificate of Authority?

No  Yes If "Yes", complete and attach supplemental Form 21S

A063967

9. Names and Usual Business Addresses of Officers (may be scheduled)

<u>Title</u>	<u>Name</u>	<u>Address</u>
CEO.	THOMAS O. QUIGLEY	E807 GERUE STREET STEPHENSON, MI 49887
Pres.	THOMAS O. QUIGLEY	E807 GERUE STREET STEPHENSON, MI 49887
V-P		
Secy	ROBIN QUIGLEY	E807 GERUE STREET STEPHENSON, MI 49887
Treas.	ROBIN DUNBAR	65 QUEEN STREET WEST, STE 530 TORONTO, ON CANADA M5H 2M5

10. Names and Usual Business Addresses of Directors (may be scheduled) If the corporation has no directors, enter "None"

<u>Title</u>	<u>Name</u>	<u>Address</u>
Chair.	THOMAS O. QUIGLEY	E807 GERUE STREET STEPHENSON, MI 49887
Dir.	THOMAS O. QUIGLEY	E807 GERUE STREET STEPHENSON, MI 49887
Dir.		
Dir.		

11. Indicate the number of shares the corporation has **authority to issue** and the number of shares **issued**, itemized by class and series (if any), and the par value of the shares, or a statement that the shares are without par value: (may be scheduled)

Class	Series	Number of Shares		Indicate Par Value (\$) per share, or "NPV" for No Par Value
		AUTHORIZED to issue	ISSUED	
COMMON		60,000	0	NPV

12. Compute the proportion of capital the corporation **expects to have represented** in Wisconsin in the coming year, using either a calendar or fiscal year basis. (NOTE: Start by completing items A(1) thru A(7). Continue, and in sequence, first complete item B and next item C, as each or both may be necessary, and post the results to item A and complete the computations in item A. Corporations having both Par Value and No Par Value shares issued will utilize both item B and item C.

12. (Continued)

Estimated 1 <sup>st</sup> Year Activity	
A.(1) Gross Business	\$ 30,000.00
(2) Plus Total Assets	\$ 32,000.00
(3) Total of lines (1) and (2)	\$ 62,000.00
(4) Wisconsin business	\$ 30,000.00
(5) Plus Wisconsin Assets	\$ 0.00
(6) Total of lines (4) and (5)	\$ 30,000.00

(7) Divide line (6) by line (3) and enter percentage 48 %

(8) Value of Issued Shares of PAR VALUE stock from item B (3) \$ 0.00

(9) Value of Issued Shares of NO PAR VALUE stock from line C (7) \$ 32,000.00

(10) Total of lines (8) and (9) \$ 32,000.00

(11) Multiply line (10) by line (7) and enter product here and item 13, below \$ 15,360.00

B. PAR VALUE STOCK (Use this section to compute valuation of Par Value stock only)

(1) Value of issued shares of Par Value stock, computed at PAR \$ \_\_\_\_\_

(2) Paid-in capital, in excess of Par, applicable to issued shares of Par Value stock \$ \_\_\_\_\_

(3) Total of lines (1) and (2). Also enter this sum on line A (8) above \$ \_\_\_\_\_

C. NO PAR VALUE STOCK (Use this section to compute valuation of No Par Value stock only)

(1) Total assets \$ 32,000.00

(2) Deduct liabilities other than capital and Surplus \$ 0.00

(3) Total of line (1) minus line (2) \$ 32,000.00

(4) Deduct amount of line A (8) above \$ 0.00

(5) Remainder of line (3) minus line (4) \$ 32,000.00

(6) Compute value of issued shares of NO PAR VALUE stock at \$10.00 per share \$ 0.00

(7) Enter the GREATER of line (5) or line (6) here. Also Enter this sum on line A (9) above. \$ 32,000.00

13. The corporation's capital represented in Wisconsin is \$ 15,360.00 (from item 12 (A) 11)

14. COMPUTATION OF FILING FEE

For the first \$60,000 of capital represented in Wisconsin \$ 100.00

Plus \$3.00 per \$1,000 of representation over \$60,000 \$ 0.00

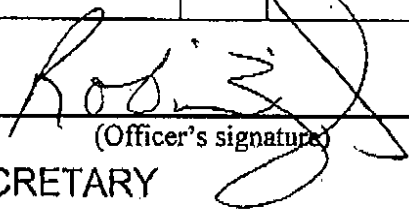
TOTAL FILING FEE (post to item 15) \$ 100.00

15. Remit the one appropriate **FILING FEE**, payable to Department of Financial Institutions

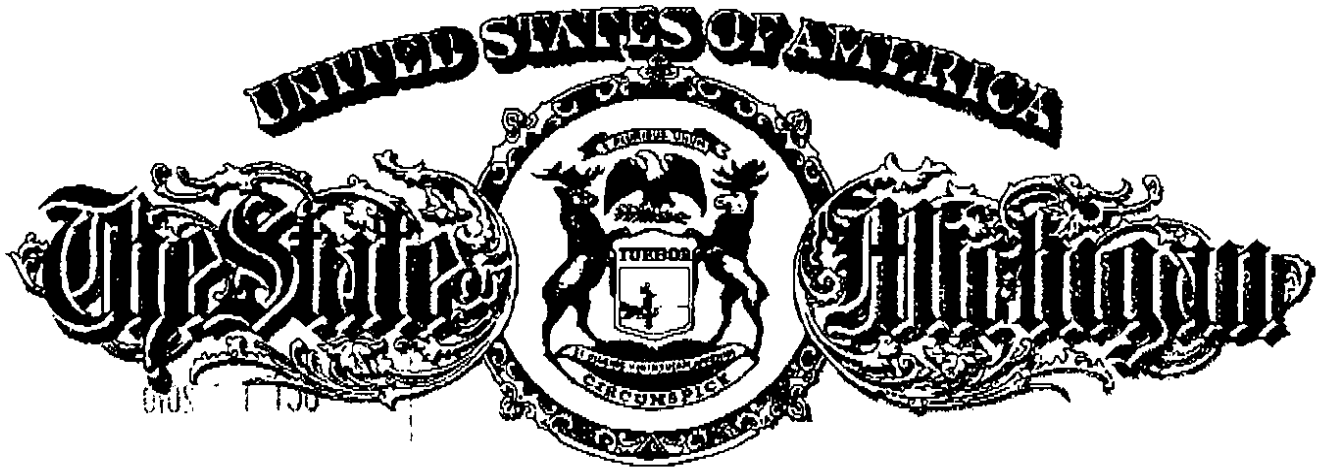
ORIGINAL Certificate, from item 14  \$ 100.00, or more	OR	ORIGINAL Certificate, from Supplemental Form 21S  \$ _____	OR	AMENDED Certificate  \$ 40.00
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16. ROBIN QUIGLEY  
(Signatory's printed name)

Executed on 10/07/2010  
(Date)

  
(Officer's signature)  
SECRETARY  
(Officer's title)

⇒ NOTE: Every application must be accompanied by a current (not more than 60 days old) **CERTIFICATE OF STATUS** issued by the Secretary of State or other public custodian of corporate records in the state in which the corporation is organized.



**Department of Energy, Labor & Economic Growth**

**Lansing, Michigan**

*This is to Certify That*

**AQUILA RESOURCES USA, INC.**

*was validly incorporated on March 26, 2004, as a Michigan profit corporation, and said corporation is validly in existence under the laws of this state.*

*This certificate is issued pursuant to the provisions of 1972 PA 284, as amended, to attest to the fact that the corporation is in good standing in Michigan as of this date and is duly authorized to transact business and for no other purpose.*

*This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.*



Sent by Facsimile Transmission  
1025509

*In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 7th day of October, 2010.*

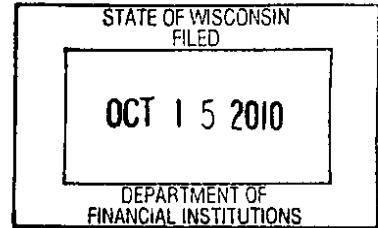
*[Signature]* Director

Bureau of Commercial Services

\$ 100,00 + \$ 25,00 Exp

Certificate of Authority  
of a Foreign Corp.

Chap. 180



Cap. Req. 260,000

005# 201010142376483

Math Mackenzie  
Natura Regulus Asset LLC  
424 E. Sherman Ave Ste 305  
Coeur d'Alene ID 83814

United States of America

State of Wisconsin

DEPARTMENT OF FINANCIAL INSTITUTIONS



**CERTIFICATE OF AUTHORITY or REGISTRATION**

Issued to

**AQUILA RESOURCES USA, INC.**

an organization formed under the laws of **MICHIGAN**,

authorizing the organization to transact business in this state, effective **October 14, 2010**,

as a

- Foreign limited liability partnership, under sec. 178.45, Wis. Stats.
- Foreign limited partnership, under sec. 179.82, Wis. Stats
- Foreign corporation, under sec. 180.1503, 180.1504, 181.1503 or 181.1504, Wis. Stats.
- Foreign limited liability company, under sec. 183.1004 or 183.1006, Wis. Stats.

Date of Issue: **October 15, 2010.**

A handwritten signature in black ink, appearing to read "Ray Allen".

RAY ALLEN, Deputy Administrator  
Division of Corporate & Consumer Services  
Department of Financial Institutions



See reverse for more information



State of Wisconsin  
DEPARTMENT OF FINANCIAL INSTITUTIONS  
DIVISION OF CORPORATE & CONSUMER SERVICES  
P O BOX 7846  
Madison, Wisconsin 53707

**02 A063967**

**AQUILA RESOURCES USA, INC.  
NORTHWEST REGISTERED AGENT LLC  
4650 W SPENCER ST STE A  
APPLETON WI 54914**

**CERTIFICATE OF REVOCATION OF CERTIFICATE OF AUTHORITY OR REGISTRATION OF A FOREIGN CORPORATION OR LIMITED LIABILITY COMPANY**

To the Organization Addressed:

The Organization was previously served by the department with a notice of determination of grounds for revocation of its Certificate of Authority or Registration to transact business in Wisconsin, but has failed, within the time set by such notice, to correct the stated grounds for revocation or to satisfy the department that such grounds do not exist.

Pursuant to Sec. 180.1531, Sec. 181.1531, or 183.1020 of the Wisconsin Statutes, the Department hereby revokes the Certificate of Authority or Registration of the above-named Organization to transact business in this state on the grounds that it

- Has not paid the annual report fee due the department within four months after it was due; or
- Has not filed with the department within four months after it was due, its annual report in condition for filing, or both

Pursuant to Statute, you are hereby notified that your authority to transact business in Wisconsin was terminated by the foregoing revocation of your Certificate of Authority or Registration.

**EFFECTIVE DATE OF REVOCATION: October 21, 2015**

Ray Allen, Secretary  
Department of Financial Institutions

\_\_\_\_\_  
\_\_\_\_\_  
SEE REVERSE FOR ADDITIONAL INFORMATION

**REINSTATEMENT OF CERTIFICATE OF AUTHORITY OF A  
REVOKED FOREIGN CORPORATION  
(Sec. 180.1531 (2) (c) as amended by 1993 Wis. Act 35)**

A foreign corporation whose Certificate of Authority has been revoked, may, **WITHIN SIX MONTHS** of the effective date of revocation, apply to the Department of Financial Institutions for reinstatement of its Certificate of Authority. The following actions are necessary:

- Complete the requisite application, Form 18-B.
- Correct each ground for revocation, which involves filing an annual report and paying all fees attendant the filing of that report.
- Pay all fees and penalties due the department under sec. 180.1502 (5) (a), Wis. Stats., or \$5,000, whichever is less.

A reinstatement under this paragraph shall relate back to and take effect as of the effective date of the revocation, and the foreign corporation may resume carrying on its business as if the revocation never occurred.

**REQUALIFICATION OF REVOKED FOREIGN CORPORATION  
(Sec. 180.1503 Wis. Stats.)**

A foreign corporation whose Certificate of Authority has been revoked, but is ineligible to apply for reinstatement under Sec. 180.1531 (2) (c), may apply for an original Certificate of Authority under the customary procedure set in Sec. 180.1503 Wis. Stats.

**REGISTRATION OF REVOKED LIMITED LIABILITY COMPANY  
(Sec. 183.1003 (5) Wis. Stats.)**

A foreign limited liability company whose Certificate of Registration has been revoked may apply for an original certificate of registration under the procedure set in sec. 183.1003 (5), Wis. Stats.

Contact **Department of Financial Institutions, Division of Corporate & Consumer Services**, P.O. Box 7846, Madison, WI, 53707-7846 to request forms to accomplish the procedures set forth above. Call (608) 261-7577 for additional information on these procedures.