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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 Filian Officer
Special Instructions to Filing Officer:





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1777 TO F. 3: CE



COVER LETTER

~	tration Section ion of Corporations					
SUBJECT:						
Name of corporation - must include suffix						
Dear Sir or M	adam:					
"Certificate o	"Application by Foreign Corp f Existence," or "Certificate of ced foreign corporation to tran	Good Standing	" and check are submitte			
Please return Marnie Sutch	all correspondence concerning , CEO	this matter to t	he following:			
	. .	Name of Pers	on			
Valentis Secu	urity Services, Inc.					
		Firm/Compan	y			
1326 Streets	Run Road			F- 3		
	_	Address				
Pittsburgh PA	A 15236					
		City/State and Z	ip code	<u>rn</u>		
info@valentis	ssecurity.com			- :		
	E-mail address: (to be used for fi	uture annual report notifi	cation) 😥		
For further in	formation concerning this mat	ter, please call:				
Marnie Sutch	at		533-5534			
Nam	e 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			
	check for the following amounteek payable to: FLORIDA DEP ing Fee	ARTMENT OF Fee & \		\$87.50 Filing Fee. Certificate of Status of 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.

Valentis Securi	ity Services, Inc.				
	orporation; must include "INCORPORATED," orp," "Inc." "Co." or "Corp.")	COMPANY," "CORPORATION,"			
(If name unavaila	able in Florida, enter alternate corporate name ad	opted for the purpose of transacting bu	siness in Florida)		
Pennsylvania 2.		82-2965932			
(State or countr		(FEI number, if applicable)			
(Date	of incorporation)	(Date of duration, if other than perpetual)			
6.					
7	(SEE SECTIONS 607.1501 & 607.150) in Road Pittsburgh PA 15236 (Principal office				
	(Current mailing	address, if different)			
8. Name and stree	et address of Florida registered agent: (P.O. LEGALINC CORPORATE SERVICES IN	•			
Office Address:	5237 Summerlin Commons, Suite 400	_			
Office Address.	Fort Myers	 Florida			
	(City)	(Zip code)	Q)		
0 D			2.1		

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.



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.

A. DIRECTORS	•						
□Chairman	Name:	□Chairman	Name:				
□ Vice Chairman	1326 Streets Run Road Address:	□ Vice Chairman	Address:				
□Director	Pittsburgh PA 15236	□Director					
□President		□President					
□Vice President		□Vice President					
☐ Secretary	□Treasurer	□ Secretary		□Treasurer			
CEO		□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	<u>. </u>	Other			
□Chairman	Name:	□ Chairman	Name:				
□Vice Chairman	Address:	□Vice Chairman	Address:				
□Director		□Director					
□President		□President		, i			
□Vice President		□Vîce President		·			
☐ Secretary	□Treasurer	☐ Secretary		; □Treasurer			
□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 the integration purposes only. Non-indexed in a document to the Department of State Annual Report form.							

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.

Marnie Sutch, CEO

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COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE

12/02/2020

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

Valentis Security Services, Inc.

is duly registered as a Pennsylvania Business Corporation under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT this Subsistence Certificate shall not imply that all fees, taxes and penalties owed to the Commonwealth of Pennsylvania are paid.

THE COLUMN OF TH

IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written

Secretary of the Commonwealth

Certification Number: TSC201202151713-1

Verify this certificate online at http://www.corporations.pa.gov/orders/verify