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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803

Fax Number : (855)330-1010

- **Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

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FOREIGN PROFIT/NONPROFIT CORPORATION

Valcor Engineering Corporation Certificate of Status

Certified Copy 0 Page Count 04 Estimated Charge \$720.00

S. FRANKLIN

JAN 18 2023

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Help

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.

(If name unavails	able in Florida, enter alternate corporate name ad-	opted for the purpose of transacting business in Fl	orida)	
Now Jor	COV		0710117	
(State or country under the law of which it is incorporated)		(FEI number, if applicable)		
55.				
(Date of incorporation)		(Date of duration, if other than perpetual)	33	
	06/27/22			
	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1502		1003 17 17 17 17	
2 Lawrenc	e Rd Springfield NJ 07081			
	(Principal office	street address)		
7 Suronoc	Rd Springfield NJ 07081		• •	
	(Current mailing :	Box NOT acceptable)	<u>-</u>	
Name and <u>stree</u> Name:	(Current mailing a character of Florida registered agent: (P.O. In Northwest Registered Agent LLC)			
Name and <u>stree</u> Name:	(Current mailing and address of Florida registered agent: (P.O. In Northwest Registered Agent LLC) (7901 4th St N STE 300)	Box <u>NOT</u> acceptable)	<u> </u>	
Name and stree	(Current mailing and address of Florida registered agent: (P.O. In Northwest Registered Agent LLC) (7901 4th St N STE 300)			
Name and stree Name: The Address: Registered age aving been namesignated in this rither agree to cold I am familiar	(Current mailing and address of Florida registered agent: (P.O. 1) Northwest Registered Agent LLC 7901 4th St N STE 300 St. Petersburg (City) ent's acceptance: ed as registered agent and to accept service application, I hereby accept the appointment omply with the provisions of all statutes relativith and accept the obligations of my position.	Box NOT acceptable) Florida 33702 (Zip code) of process for the above stated corporation and as registered agent and agree to act in this ative to the proper and complete performance	it the pla	
Name and stree Name: The Address: Registered age aving been namesignated in this rither agree to cold I am familiar	(Current mailing and address of Florida registered agent: (P.O. 1) Northwest Registered Agent LLC 7901 4th St N STE 300 St. Petersburg (City) ent's acceptance: ed as registered agent and to accept service application, I hereby accept the appointment omply with the provisions of all statutes relations.	Box NOT acceptable) Florida 33702 (Zip code) of process for the above stated corporation and as registered agent and agree to act in this ative to the proper and complete performance	it the pla	

11. For initial indexing purposes, fist names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

under the law of which it is incorporated.

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

A. DIRECTORS						
□Chairman	Name: Bruce Friedman	□Chairman	Name: John Trezza			
□Vice Chairman	Address:	□Vice Chairman	Address:			
X Director	7901 4th St N STE 300	□ Director	7901 4th St N STE 300			
□President	St. Petersburg FL 33702	X President	St. Petersburg, FL 33702			
□Vice President		□Vice President				
XSecretary	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			
□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 (b). 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. $\mathcal{T} = \mathcal{T} + I$						
12.	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.						

Bruce Friedman, Director
(Typed or printed name and capacity of person signing application)

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STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES SHORT FORM STANDING

VALCOR ENGINEERING CORPORATION 9084025000

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic For-Profit Corporation was registered by this office on April 05, 1951.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and office are:

BRUCE A FRIEDMAN 2 LAWRENCE RD. SPRINGFIELD, NJ 07081-0000



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 17th day of January, 2023

Elizabeth Maher Muoio State Treasurer

Sup of Mun-

Certificate Number 6139364897

Verify this certificate online at

https://www.l.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp