

	(Requestor's Name)				
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(Address)					
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	(City/State/Zip/Phone #)				
PICK-U	P WAIT	MAIL			
	(Business Entity Name)				
(Document Number)					
Certified Copies	Certificates of S	itatus			
Special Instructions	s to Filing Officer;				
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COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: GENEMAGIC BIOSCIENCES U	JS INC.		
	orporation - n	nust include suffix	
Dear Sir or Madam;			
The enclosed "Application by Foreign Corpo "Certificate of Existence," or "Certificate of above referenced foreign corporation to trans	Good Standin	g" and check are subm	
Please return all correspondence concerning	this matter to	the following:	
JINGMIN ZHOU			
	Name of Per	son	
GENEMAGIC BIOSCIENCES US INC.			
	Firm/Compar	ıy	
8037 Bangle Lane			
	Address		
ORLANDO, FL 32836			
C	ity/State and	Zip code	
jingminzhou@genemagicbio.com			
E-mail address: (to	be used for	future annual report no	tification)
For further information concerning this matter	r, please call:		
GORDON FOO, CPA	267	5876374	
Name of Person	Area Code	Daytime Telepho	one 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	
Enclosed is a check for the following amount Please make check payable to: FLORIDA DEPA \$70.00 Filing Fec S78.75 Filing Fe Certificate of S	RTMENT OF	F STATE 78.75 Filing Fee & fertified Copy	S87.50 Filing Fee, Certificate of Status & Certified Copy

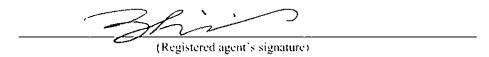
APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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.

(If name unavaila	ible in Florida, enter alternate corporate nar	ne ado	pted for the purpose of transacting business in Florid	da)
DELAWARE, USA		3. (FEI number, if applicable)		
(State or countr	y under the law of which it is incorporated)		(FEI number, if applicable)	
MARCH 21, 20	^			
(Date of incorporation)			(Date of duration, if other than perpetual)	
	(Date first transacted busines		orida, if prior to registration) F.S., to determine penalty liability)	-
S037 Rangle Lan	(SEE SECTIONS 607.1501 & 607 : Orlando, FL 32836	.1302.	F.S., to determine penalty hability)	
- Trange Late		.en	street address)	<u> </u>
	(r mojar c	nnice <u>s</u>	street address)	75 11
		iling a	dalace of differences	<u>-</u>
	(Current ma		unicos, ii different)	
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Name and stree		-	· -	
	<u>t address</u> of Florida registered agent: (1	-	· -	rra
Name and stree		-	· -	
Name:	<u>t address</u> of Florida registered agent: (1	-	· -	
	t address of Florida registered agent: (I JINGMIN ZHOU 8037 Bangle Lane	°.O. E	· -	

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

100

□Chairman	Name:	UChairman	Name:		
□Vice Chairman	Address: Orlando, FL 32836	□ Vice Chairman	Address:		
Director	Witanuo, FE 52650	□Director			
L!President		LlPresident			
□Vice President		□Vice President			
□ Secretary	□Treasurer	☐ Secretary	□Treasurer		
DOther		ElOther	[]Other		
⊏Chairman	Name:	□Chaitman	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:	LJChairman	Name:		
□Vice Chairman	Address:	□Vice Chairman	Address:		
□Director		□ Director			
1 iPresident		l'IPresident			
□Vice President		□Vice President			
□ Secretary	□Treasurer	□ Secretary	□Treasurer		
L2Other	. Other	f.]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.

JINGMIN ZHOU

Delaware The First State

I, CHARUNI PATIBANDA-SANCHEZ, SECRETARY OF STATE OF THE STATE

OF DELAWARE, DO HEREBY CERTIFY THAT "GENEMAGIC BIOSCIENCES US INC."

IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS

IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE NOT HAVING

BEEN CANCELLED OR DISSOLVED SO FAR AS THE RECORDS OF THIS OFFICE

SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

THE FOLLOWING DOCUMENTS HAVE BEEN FILED:

CERTIFICATE OF INCORPORATION, FILED THE TWENTY-FOURTH DAY OF FEBRUARY, A.D. 2022, AT 6:54 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID

CERTIFICATE IS THE ONLY PAPER OF RECORD, THE CORPORATION IN

QUESTION NOT HAVING FILED AN AMENDMENT NOR HAVING MADE ANY

CHANGE WHATSOEVER IN THE ORIGINAL CERTIFICATE AS FILED.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GENEMAGIC BIOSCIENCES US INC." WAS INCORPORATED ON THE TWENTY-FOURTH DAY OF FEBRUARY, A.D. 2022.

3315 002228

Charuni Patibanda-Sanchez, Secretary of State
Authentication: 203900960

C. G. Sanchez

Date: 06-10-25





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

Charuni Patibanda-Sanchez, Secretary of State

C. G. Sancher

Authentication: 203900960

Date: 06-10-25