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SECRETARY OF STATE
ANALYSEE FLORIDA

1. HARRIE

COVER LETTER

TO:		ration Se on of Co	ection rporations				
SUBJ	ECT:	AVIO	, INC.				
	•		Name	e of corpora	tion - m	ust include suffix	
Dear S	Sir or Ma	dam:					
"Certi	ficate of	Existence		te of Good	Standin	g" and check are sul	ect Business in Florida," omitted to register the
Please	return a	ll corres _i	ondence concer	ning this m	atter to	the following:	
Chamre	oen Chett	y, CEO			_		
				Name	of Pers	on	
Avioq,	Inc.			<u></u>			
PO Box	x 12808			Firm/0	Compan	у	
2				A	ddress		
Researc	ch Triang	le Park, N	IC 27709				
Chetty	c@avioq.	com		City/Sta	te and Z	Cip code	
-			E-mail addre	ss: (to be us	ed for f	uture annual report	notification)
For fur	ther info	ormation	concerning this	matter, plea	se call:		
Gary M	lills			at (919	,	247-8830	
	Name	of Perso	n	Area (Code	Daytime Telep	hone Number
STREET/COURIER ADDRESS:				MAILING ADDRESS:			
Registration Section Division of Corporations			Registration Section Division of Corporations				
Clifton Building			P.O. Box 6327				
2661 Executive Center Circle Tallahassee, FL 32301		Tallahassee, FL 32314					
Enclos	ed is a cl	heck for	the following an	nount:			
\$ \$70).00 Filir	ig Fee	S78.75 Fili Certificate			8.75 Filing Fee & ratified Copy	□ \$87.50 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.

I. AVIOQ, INC.						
	corporation; must include "INCORPORAT Corp," "Inc," "Co," or "Corp.")	red," '	"COMPANY," "CORPORATION	Ν,"		
(If name unava	ilable in Florida, enter alternate corporate n	ame ad	opted for the purpose of transactin	g business in Florida)		
2. NORTH CAR	OLINA	_ 3	20-3180173			
(State or cour	try under the law of which it is incorporated		(FEI number, if ap	plicable)		
4. FEBRUARY	11, 2013	5				
	(Date of incorporation)		(Date of duration, if other	other than perpetual)		
6.						
	(SEE SECTIONS 607.1501 & 6	07.1502	Florida, if prior to registration) 2, F.S., to determine penalty liabili	ity)		
7.104 T W ALEX	ANDER DRIVE, RESEARCH TRIANGL		K, NC 27709 office address)			
	(,,	meibai	onice address)			
PO Box 12808.	RESEARCH TRIANGLE PARK, NC 277		address, if different)			
	(Curieni 1	ımınıR	audiess, ii different)			
8. Name and str	eet address of Florida registered agent:	(P.O.	Box NOT acceptable)	28 1		
Name:	URS Agents, LLC					
Office Address:	3458 Lakeshore Drive			HASSI		
	Tallahassee		Elorido 32312			
	(City)		, Florida 32312 (Zip code)	OF STATE		
	·		(1 /	**************************************		
•	gent's acceptance:			>' ' ω		
	med as registered agent and to accept is application, I hereby accept the application.					
further agree to	comply with the provisions of all statu	tes rel	ative to the proper and comple	te performance of my		
duties, and I am	familiar with and accept the obligation	ns of n	ny position as register e d agent	l		
	URS Agents, LLC					
	By: Amy Prray An	ny Purd	ly, Assistant Secretary			
·	(Registe	ered age	ent's signature)			

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.

11. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Zhi-Yuan Che Address: 104 T W Alexander Drive, PO Box 12808, Research Triangle Park, NC 27709 Vice Chairman: Address: Director: Chamroen Chetty Address: 104 T W Alexander Drive, PO Box 12808, Research Triangle Park, NC 27709 Director: X. James Li Address: 104 T W Alexander Drive, PO Box 12808, Research Triangle Park, NC 27709 **B. OFFICERS** President: X. James Li Address: See above Vice President: CEO: Chamroen Chetty Address: See above Secretary: X. James Li Address: See above Treasurer: Chamroen Chetty Address: See above NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 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.

13. Chamroen Chetty. CEO



NORTH CAROLINA Department of the Secretary of State

CERTIFICATE OF EXISTENCE

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

AVIOQ, INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 11th day of February, 2013, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.





Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 11th day of May, 2017.

Elaine I. Marshall

Secretary of State