Division of Corporations

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### Florida Department of State

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Division of Corporations

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From:

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#### FOREIGN PROFIT/NONPROFIT CORPORATION ALLIED VISION TECHNOLOGIES, INC.

Certificate of Status	0
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Page Count	02
Estimated Charge	\$70.00

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MAY 3 0 2019

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

	N TECHNOLOGIES, INC.	
(Enter name of c	orporation; must include "INCURP lorp," "Inc," "Co," or "Corp.")	PORATED," "COMPANY," "CORPORATION,"
(If name unavail DELAWARE	able in Florida, enter alternate corpo	sorate name adopted for the purpose of transacting business in Plorida)
	y under the law of which it is incorp	rporated) (FEI number, if applicable) 5.
(Date UPON QUALIE	of incorporation) FICATION	(Date of duration, if other than perpetual)
	(Date first transacted	d business in Florida, if prior to registration)
102 PICKERING	(SEE SECTIONS 607.150 SWAY, SUITE 502, EXTON, PA 1	d business in Florida, if prior to registration)  101 & 607.1502, F.S., to determine penalty liability)  19341  (Principal office address)
102 PICKERING	WAY, SUITE 502, EXTON, PA 1	(Principal office address if different)
	WAY, SIJITE 502, EXTON, PA 1	(Principal office address)  urrant mailing address, if different)  agent: (P,O. Box NOT acceptable)
. Name and <u>stree</u> Name:	(Cu	(Principal office address)  urrent mailing address, if different)  agent: (P.O. Box NOT acceptable)  ONS, INC.
. Name and stree	(Cu et address of Flurida registered a AGENTS AND CORPORATIO	(Principal office address)  urrent mailing address, if different)  agent: (P.O. Box NOT acceptable)  ONS, INC.

Having been named as registered agent und to uccept 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.

(Registered agent'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. Nал	nes and business addresses of officers and/	or directors:
A. DIR	ECTORS	
Chairman	ANDREAS GERK	
Address:	TASCHENWEG 2A D-07646 STADTRODA	GERMANY DEU
Vice Chai	irman:	
Address:		
Director:		
Director		V seek
		₹ <b>7</b>
Adoress:		
		1 t man C V
B. OFF		第章 C 2
President:	MICHAEL TROIANO	
Address:	102 PICKERING WAY, SUITE 502, EXTON	PA 19341
Vice Presi	dent:	
71001C\$\$.		
	NAVEN RAM	
Secretary:	300-4621 CANADA WAY BURNABY, BC, C	CANADA VEC AVE
Address.	NAVEN RAM	ANADA 130 4A8
Treasurer:		
Address:	300-4621 CANADA WAY BURNABY, BC, C	ANADA V5G 4X8
NOTE: 1	f necessary, you may attach an addendum	to the application listing additional officers and/or directors.
12	Mulus in	C
The office	Signature	of Director or Officer
are true ar	id that he or she is aware that false informa	bo is listed in number 11 above) affirms that the facts stated herein ition submitted in a document to the Department of State constitutes
a third deg	gree felony as provided for in s.817.155, F	S.
13. <u>MICE</u>	IAEL TROIANO, PRESIDENT	
	( Typed or printed name and	capacity of person signing application)

# Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "ALLIED VISION TECHNOLOGIES, INC." IS

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

GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE

RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-NINTH DAY OF MAY,

A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ALLIED VISION TECHNOLOGIES, INC." WAS INCORPORATED ON THE THIRTIETH DAY OF APRIL, A.D. 2019.

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

Authentication: 202918495

Date: 05-29-19

7398474 8300
SR# 20194795341
You may verify this certificate online at corp.delaware.gov/authver.shtml