# F19000004841

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Constitution of Str. Off
Special Instructions to Filing Officer:





200336115402



19 OCT 21 83 2:12

K. SALY OCT 25 2019 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 019676 7545742

AUTHORIZATION : Spelleman

COST LIMIT : \$ 720.00

\_\_\_\_\_

ORDER DATE: October 22, 2019

ORDER TIME : 11:15 AM

ORDER NO. : 019676-005

CUSTOMER NO: 7545742

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#### FOREIGN FILINGS

NAME: HALIODX INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

\_\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Robinson -- EXT# 62968

EXAMINER:

### **COVER LETTER**

TO: Registration Section Division of Corporations			
HALIODX INC.			
	e of corporation -	must include suffix	
Dear Sir or Madam:			
	ite of Good Stand	authorization to Transact Business in Florida," ing" and check are submitted to register the s in Florida.	
Please return all correspondence conce NICHOLAS FORGIONE	rning this matter t	o the following:	
	Name of P	erson	
DEBORAH A. NILSON & ASSOCIATES	S, PLLC		
10 EAST 40TH STREET. SUITE 3310	Firm/Comp	any	
	Addres	s	
NEW YORK, NY 10016			
	City/State and	1 Zip code	
ITHIAM@NILSONLAW.COM			
E-mail addre	ess: (to be used fo	r future annual report notification)	
For further information concerning this	matter, please ca	II:	
NICHOLAS FORGIONE	212 at (	687-1155	
Name of Person	Area Code	Daytime Telephone Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Enclosed is a check for the following at	nount:		
□ \$70.00 Filing Fee □ \$78.75 Fil Certificate	-	\$78.75 Filing Fee & S87.50 Filing Fee, Certified Copy Certified Copy  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.

HALIODX INC			
(Enter name of c "Inc.," "Co.," "C	orporation: must include "INCORPORATED." ' orp," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATION,"	•
(If name unavails	able in Florida, enter alternate corporate name ad	lopted for the purpose of transacting	business in Florida)
DELAWARE 2.	,		ŕ
2. (State or country under the law of which it is incorporated)		(FEI number, if applicable)	
2/16/2018 4.			
	(Date of incorporation) 5. (Date of duration, if other than perpetual		an perpetual)
6.			
737 N. 5TH STR	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.150) EET, SUITE #600, RICHMOND, VA 23219	Florida, if prior to registration)  2, F.S., to determine penalty liability	)
7	(Principal	office address)	
<del></del>	(Current mailing	address, if different)	
8. Name and street Name:	et address of Florida registered agent: (P.O.  Corporation Service Company	Box NOT acceptable)	9 OCT 24 F
Office Address:	1201 Hays Street	<del></del>	PM 7: 20
	Tallahassee	32301 , Florida	20 Rib/
	(City)	(Zip code)	

#### 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.

Corporation Service Company

By: Asst. Vice President

(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. Names and business addresses of officers and/or directors:	F. 1.
A. DIRECTORS  VINCENT FERT  Chairman:	19 OCT 21; PM 7:20
737 N. 5TH STREET, SUITE #600 Address:	(A) (1) 12n
RICHMOND, VA 23219	TONY.
Vice Chairman:	
737 N. 5TH STREET, SUITE #600	
Address:	
FABIENNE HERMITTE	
Director:	
Address: RICHMOND, VA 23219	
Director:	
Address:	
B. OFFICERS  VINCENT FERT  President: 737 N. 5TH STREET, SUITE #600  RICHMOND, VA 23219	
Vice President:	
Address:	
	-
DEBORAH A. NILSON Secretary:	
Address: 10 EAST 40TH STREET, SUITE 3310, NEW YORK, NY 10016	
STEPHANE DEBONO Treasurer:	
Address: 737 N. 5TH STREET, SUITE #600, RICHMOND, VA 23219	
NOTE: If necessary, you may attach an addendum to the application listing addition 12.	nal officers and/or directors.
Signature of Director or Officer	
The officer or director signing this document (and who is listed in number 11 above) are true and that he or she is aware that false information submitted in a document to a third degree felony as provided for in s.817.155, F.S.  DEBORAH A. NILSON, SECRETARY	

(Typed or printed name and capacity of person signing application)

## Delaware

#### The First State

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

DELAWARE, DO HEREBY CERTIFY "HALIODX 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-SECOND DAY OF OCTOBER, A.D. 2019.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "HALIODX INC."

WAS INCORPORATED ON THE SIXTEENTH DAY OF FEBRUARY, A.D. 2018.

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

19 0CT 24 PM 7: 25

Authentication: 203839925

Date: 10-22-19