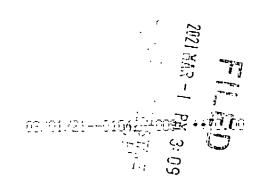
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۲,	COVI	ER LETTI	CR .	•
TO: Registration Se	ection			
Division of Cor				
SUBJECT: Valvetek	Utility Services Inc.			
	Name of corp	oration - must	include suffix	
Dear Sir or Madam:				
The		C A -1		
"Certificate of Existence	ion by Foreign Corporation." or "Certificate of Goo	od Standing" a	nd check are sul	ict Business in Flor bmitted to register t
above referenced foreig	m corporation to transact	business in Fl	orida.	J
Picase return all corresp	condence concerning this	matter to the	following:	7 G
Gary Mahoney			_	
	Na	me of Person	<u></u>	· · ·
Valvetek Utility Services	Inc.			-
	Fin	m/Company	_ .	· · · · ·
20 Lafayette Place				100
		Address		l
Keniliwirth NJ 07033				
	City/	State and Zip of	-ode	
gmahoney@valvetek.net	City/t	state and Elp (Jouc	
	E-mail address: (to be	used for futur	e annual report	notification)
For fresher info				
ror turner information	concerning this matter, p	icase can:		
Gary Mahoney	917 at (, 513-	6556	
Name of Person		a Code	Daytime Telep	hone Number
errer (con	IDIED ADDDESS		\$ # 4 BE \$\$145 A	DDDDGG
STREET/COURIER ADDRESS: Registration Section			MAILING ADDRESS: Registration Section	
	Division of Corporations		Division of Corporations	
Registration Sec	porations		P.O. Box 6327 Tallahassee, FL 32314	
Registration Sec	-			

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.

1.	y Services Inc.				
(Enter name of "Inc.," "Co.," "	corporation; must include "INCORPORATED Corp," "Inc," "Co," or "Corp."))," "COMPANY," "CORPORATI	ON,"		
(If name unava	lable in Florida, enter alternate corporate name	e adopted for the purpose of transac	ting business in Florida)		
2. New York Stat	e 3	3 23-2703419			
	try under the law of which it is incorporated)	(FEI number, if applicable)			
(Date of incorporation)		5. (Date of duration, if other than perpetual)			
6. February 2020		,	,		
20 Lafornies Blo		502, F.S., to determine penalty liab	oility)		
7	ce Kenilworth Nj 07033	502, F.S., to determine penalty liab	202		
7. 20 Lafayette Pla	ce Kenilworth Nj 07033 (Principal off		2021 7 3 - 1		
	ce Kenilworth Nj 07033 (Principal off	fice <u>street</u> address) ng address, if different)	2021 7513 - 1		
8. Name and stree Name:	(Principal off (Current mailinet address of Florida registered agent: (P.6	fice <u>street</u> address) ng address, if different)	202		
8. Name and stre	(Principal off (Current mailinet address of Florida registered agent: (P.G.)	fice <u>street</u> address) ng address, if different)	2021 7513 - 1		

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.

(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.

A. DIRECTORS				
□ Chairman	Name:	□ Chairman	Name: Po Box 817 Address: Jupiter, Fl 33478	
□Vice Chairman	Address: PO Box 7075	□ Vice Chairman		
□Director	Watchung Nj 07069	□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	2021 H	
□Vice President		□Vice President	MAR.	
☐ Secretary	Treasurer	Secretary	OTreasurer [7]	
□Other		Other	Other	
			09	
□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: U individuals may be a	ise an attachment to report more than sin (6). The an added to the index when filing your Florida Departs	ment of State Annual Rep	for reporting purposes only. Non-indexed port form.	
	Signature of Directo	r or Officer		
The officer or direct she is aware that falls.817.155, F.S.	or signing this document (and who is listed in num se information submitted in a document to the Dept	ber 11 above) affirms tha artment of State constitut	at the facts stated herein are true and that he or es a third degree felony as provided for in	
, Gary Mahone	ey			

State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of VALVETEK UTILITY SERVICES INC. was filed on 05/01/1995, under the name of B.C.A. MIDLANTIC INC., with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.

A Certificate of Amendment B.C.A. MIDLANTIC INC., changing its name to VALVETEK UTILITY SERVICES INC., was filed 09/21/2001.



7021 MAR -1 PM 3: 09

WITNESS my hand and the official seal of the Department of State at the City of Albany, this 09th day of February two thousand and twenty-one.

Brada C Hylan

Brendan C Hughes

Executive Deputs Secretary of State