F2100000310/

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT	MAIL				
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status	5				
Special Instructions to Filing Officer:					

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то:	Registration Section Division of Corporati	ons					
SHRI	JECT:	AYAL.	А ТОР ТЕСН	OJOZI	GIES INC.		
301111		Name of co	orporation -	must ir	nclude suffix		
Dear S	Sir or Madam:						
"Certi		"Certificate of 0	Good Standii	ng" an	ation to Transact Business in d check are submitted to regi rida.		••
Please	return all corresponder	nce concerning t	his matter to	the fo	llowing:		
		Α	RI MALCON	A			
			Name of Pe	rson			
			Ui/C				
			Firm/Compa 70 NW 100TI	•			
		<u>-</u>					
			Address			4:	2021
			МІАМІ, FL 3 —————			<u> </u>	<u> </u>
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		corpa	rimalcolm@g	gmail.co	om		_
	E-	mail address: (to	be used for	tuture	annual report notification)	(1) 1)27 * 1	
For further information concerning this matter, please call:							PM 6: 09
Al	RLMALCOM	at (310	498-2	128	ا المحر	Ğ
	Name of Person		Area Code	,	Daytime Telephone Number		
	STREET/COURIER Registration Section Division of Corporati The Centre of Tallaha 2415 N. Monroe Stre Tallahassee, FL 3230	ions assec et. Suite 810			MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassec, FL 32314		

☐ \$87.50 Filing Fee,

Enclosed is a check for the following amount:
Please make check payable to: FLORIDA DEPARTMENT OF STATE

 \blacksquare \$70.00 Filing Fee \Box \$78.75 Filing Fee & \Box \$78.75 Filing Fee &

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.

(16	to in Cheide and a drawn agents agent	adopted for the purpose of transacting business in Florida)
(11 name unavanao NEW YORK		VA 1713007
	under the law of which it is incorporated)	(FEI number, if applicable)
12/11/2019	under the law of which it is memporated)	PERPETUAL
	f incorporation) 5.	(Date of duration, if other than perpetual)
		in Florida, if prior to registration) 1502, F.S., to determine penalty liability)
	270 NW 1001	TH ST MIAMI, FL 33150
	(Principal of	fice street address)
		ing address, if different)
Name and street Name:	address of Florida registered agent: (P. ARI MALCOM	
ffice Address:	270 NW 100TH ST	
	MIAMI	
	(City)	(Zip code)

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 ARI MALCOM Name: □Chairman Name: □Chairman 270 NW 100TH ST □Vice Chairman Address: Address: MIAMI, FL 33150 ➡Director **ElDirector** □President □President ∐Vice President □Vice President □ Treasurer □ Secretary Treasurer = □ Secretary □Other _____ □Other _____ □Other _____ □Other ____ Name: _____ Name: _____ □Chairman Chairman □Vice Chairman Address: □Vice Chairman Address: ______ Director □ Director □President □President ☐ Vice President □Vice President ☐Treasurer USecretary []Treasurer **D**Secretary Other _____ □Other _____ ☐Other _____ Other _____ □Chairman □Chairman ☐ Vice Chairman Address: □Vice Chairman Address: ______ □Director □Director []President □President □ Vice President ____ □Vice President ☐Secretary □ Treasurer □ Secretary □ Treasurer []Other _____ □Other _____ □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 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. ARI MALCOM PRESIDENT

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

State of New York Department of State } ss:

I hereby certify, that the Cartificate of Incorporation of AYALA TOP TECHNOLOGIES INC. was filed on 12/11/2019, 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.



Witness my hand and the official seal of the Department of State at the City of Albany, this 05th day of May two thousand and twenty-one.

Braden C Hylan

Brendan C. Hughes Executive Deputy Secretary of State

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