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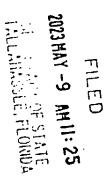
(Requestor's Name)				
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(Cit	ty/State/Zip/Phone	e #)		
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COVER LETTER

	stration Section sion of Corporations			
SUBJECT	X/ 10.6. A I			
SUBJECT		poration - mu	st include suffix	
Dear Sir or N	Лаdam:			
"Certificate	d "Application by Foreign Corpora of Existence," or "Certificate of Go nced foreign corporation to transac	ood Standing	and check are subi	
Please return	all correspondence concerning thi	is matter to th	e following:	
SARAH YA	1			
	N	iame of Perso	on	
VALSOFT C	ORPORATION INC.			
	Fi	rm/Company		
7405 ROUTE	E TRANSCANADIENNE SUITE 100			
		Address		
SAINT LAU	RENT, QC H4T 1Z2			
	City	//State and Zi	p code	
TAX@VALS	SOFTCORP.COM			
	E-mail address; (to b	e used for fu	ture annual report n	otification)
For further in	nformation concerning this matter.	please call:		
SARAH YAI	at (14)	979 - 586	1
Nan	ne of Person A	rea Code	Daytime Teleph	none Number
Regi Divi The 2415	SEET/COURIER ADDRESS: Stration Section sion of Corporations Centre of Tallahassee 5 N. Monroe Street, Suite 810 ahassee, FL 32303		MAILING Al Registration So Division of Co P.O. Box 6327 Tallahassee, F	ection orporations
	heck for the following amount: heck payable to: FLORIDA DEPAR ling Fee	& □ \$78	STATE .75 Filing Fee & tified Copy	S87.50 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.

		TED," "COMPANY," "CORPORATION	N,"		
Valsoft America	<u>. </u>	· · · · · · · · · · · · · · · · · · ·			
(If name unavail	able in Florida, enter alternate corporate	name adopted for the purpose of transacting	ig business in Florida)		
DELAWARE 3.		3. 61-1989745			
	y under the law of which it is incorporate		oplicable)		
DECEMBER 3	1 2021	5. N/A	N/A		
(Date	of incorporation)	5. (Date of duration, if other	than perpetual)		
N/A					
	(SEE SECTIONS 607.1501 &	ness in Florida. if prior to registration) 607.1502, F.S., to determine penalty liabili	ity)		
16192 Coastal Hi	ghway, Lewes, Delaware, 19958, Count	y of Sussex			
		oal office street address)			
7405 ROUTE TI	RANSCANADIENNE SUITE 100, SAIN	NT-LAURENT, QC H4T 1Z2			
	(Current	mailing address, if different)			
. Name and stree	et address of Florida registered agent:	: (P.O. Box NOT acceptable)			
Name:	Corporation Service Company				
ffice Address:	1201 Hays Street	 			
	Tallahassee	Florida 32301	202		
	(City)	$\frac{32301}{\text{(Zip code)}}$	5. 5. 1		
ъ			F11 2023 HAY		
	ent's acceptance: and as registered agent and to accept	t service of process for the above stated	~: (6) [=		
esignated in this urther agree to c	application, I hereby accept the app	pointment as registered agent and agroutes relative to the proper and comple	ee to act in this capacit		
_	Tyler Ga	tes			
	(Registered 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.

A. DIRECTORS				
□Chairman	Stephane Manos Name:	□Chairman	Name:	
□Vice Chairman	Address: 7405 route Transcanadienne	□Vice Chairman		
□Director	suite 100, Saint-Laurent, QC, H4T1Z2	Director	suite 100, Saint-Laurent, QC, H4T1Z2	
President	Canada	□President		
□Vice President		■ Vice President		
□Secretary	□Treasurer	☐ Secretary	□Treasurer	
Other	Other	Other	Other	
□Chairman □Vice Chairman □Director	suite 100, Saint-Laurent, QC, H4T1Z2	□Chairman □Vice Chairman □Director	Name:	
□President	Canada	President		
□Vice President		□ Vice President		
□Secretary	□Treasurer	☐ Secretary	□Treasurer	
Treasure Other	T □Other □	Other	□Other	
□Chairman □Vice Chairman	Name:	□Chairman □Vice Chairman	Name:	
□Director		□Director		
□President		□President		
□Vice President		□Vice President		
□Secretary	□Treasurer	☐ Secretary	□Treasurer	
Other	Other	Other	Other	
individuals may be	Use an attachment to report more than six (6). The added to the index when filing your Florida Department of the index when filing your	rtment of State Annual Re	port form.	
12.	Signature of Direct			
	ctor signing this document (and who is listed in nuralse information submitted in a document to the De	mber 11 above) affirms the partment of State constitu		
13.	David Felicissimo	Vice President		

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



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

DELAWARE, DO HEREBY CERTIFY "VALSOFT AMERICA 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-FIFTH DAY OF APRIL, A.D.

2023.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "VALSOFT AMERICA"

INC." WAS INCORPORATED ON THE FIRST DAY OF MARCH, A.D. 2021.

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

Authentication: 203213096

Date: 04-25-23