F24000005273

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

Office Use Only



000436661300

2024-007-9-111-5:22

2024 OCT -9 AM

RECEIVED

00T 0 9 2024 C. Brumbley CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Tallhassee, FL 3230 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 649039 8322670

AUTHORIZATION :

COST LIMIT : \$ 70.00

ORDER DATE: September 18, 2024

ORDER TIME : 10:18 AM

ORDER NO. : 649039-030

CUSTOMER NO: 8322670

FOREIGN FILINGS

NAME: VALON TECHNOLOGIES, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Miller -- EXT#

EXAMINER: _____

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.

Valon Technolo	corporation; must include "INCORPORATED." "	COMBANIS " "CORROR CTIONS"		
	orporation; must include "INCORPORATED." (orp.," "Inc.," "Co.," or "Corp.")	LOMPANY, "CORPORATION,		
(If name unavail	able in Florida, enter alternate corporate name ado	pted for the purpose of transacting b	usiness in Florida	
. DE	3 84-	84-2070751		
(State or counti	ry under the law of which it is incorporated)	(FEI number, if applicable)		
06/10/2019	5.			
(Date of incorporation)		(Date of duration, if other than perpetual)		
ı	(Date first transacted business in Fl			
860 Broadway, F	(Date first transacted business in FI (SEE SECTIONS 607.1501 & 607.1502. I. 4, New York, NY 10003 (Principal office see PMB 46669, New York, NY 10003	F.S., to determine penalty liability)		
860 Broadway, F	(SEE SECTIONS 607.1501 & 607.1502. I. 4, New York, NY 10003 (Principal office s	F.S., to determine penalty liability) treet address)	2624.0	
860 Broadway, F	(SEE SECTIONS 607.1501 & 607.1502. 1. 4. New York, NY 10003 (Principal office second PMB 46669, New York, NY 10003	F.S., to determine penalty liability) treet address) ddress, if different)	2624 01.1	
860 Broadway, F	(SEE SECTIONS 607.1501 & 607.1502. 1. 4. New York, NY 10003 (Principal office section of the s	F.S., to determine penalty liability) treet address) ddress, if different)	2624.01.7-9	
228 Park Ave. S. Name and stree Name:	(SEE SECTIONS 607.1501 & 607.1502. 1. 4. New York, NY 10003 (Principal office section of the PMB 46669. New York, NY 10003 (Current mailing act address of Florida registered agent: (P.O. Better address)	F.S., to determine penalty liability) treet address) ddress, if different)	-9 PH	
228 Park Ave. S. S. Name and stre	(SEE SECTIONS 607.1501 & 607.1502. 1. 4. New York, NY 10003 (Principal office service Service Company) (Current mailing as Corporation Service Company) 1201 Hays Street	F.S., to determine penalty liability) treet address) ddress, if different)	i	

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	
Ву:	An	
	(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 See attached list Name: □ Chairman ☐ Chairman Name: □Vice Chairman Address: _____ □ Vice Chairman Address: ☐ Director □Director □President □ President □Vice President _ □ Vice President □ Secretary ☐Treasurer □ Secretary □Treasurer □Other _____ □Other _____ □Other _____ □Other _____ □ Chairman Name: ______ □Chairman Name: _____ □ Vice Chairman Address: ___ ____ □ Vice Chairman □ Director □ Director □ President □President □Vice President ______ □ Vice President ☐Treasurer □Treasurer □ Secretary □ Secretary □Other _____ ☐Other _____ □ Other _____ □Other____ Name: _____ □ Chairman □ Chairman Name: □Vice Chairman Address: ______ ☐ Vice Chairman Address: _____ □Director □ Director □President □President □ Vice President _____ ☐ Vice President □ Secretary □Treasurer □ Secretary ☐ Treasurer □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) aftirms 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.

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

Andrew Wang, CEO

Valon Technologies, Inc.

Officer	Title	Officer	Director	Address
Andrew Wang	CEO	TRUE	TRUE	860 Broadway, Fl 4, New York, NY 10003
Linda Du	COO	TRUE		860 Broadway, FI 4, New York, NY 10003
Jonathan Hsu	Vice President	TRUE		860 Broadway, FI 4, New York, NY 10003
Timothy Mayopoulos	Director		TRUE	860 Broadway, FI 4, New York, NY 10003
Josh Dart	Director		TRUE	860 Broadway, FI 4, New York, NY 10003
Brian McGrath	Director		TRUE	860 Broadway, FI 4, New York, NY 10003
Angela Strange	Director		TRUE	860 Broadway, Fl 4, New York, NY 10003
Max Fink	Director		TRUE	860 Broadway, FI 4, New York, NY 10003



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

DELAWARE, DO HEREBY CERTIFY "VALON 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 SEVENTH DAY OF OCTOBER, A.D. 2024.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "VALON

TECHNOLOGIES, INC." WAS INCORPORATED ON THE TENTH DAY OF JUNE, A.D.

2019.

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

Authentication: 204574086

Date: 10-07-24

7459692 8300 SR# 20243886746