Michael G. Adams Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov

Certificate of Authority

Pursuant to the provisions of KRS 14A.9 - 030 the undersigned hereby applies for authority to transact business in Kentucky on behalf of the entity named below and, for that purpose, submits the following statements.

1. The business entity is a profit corporation.

2. The name of the entity is: PIONEX INC.

3. The name of the entity to be used in Kentucky is (if applicable): N/A

4. The state or country whose law the entity is organized is **Delaware**.

5. The date of organization is 7/12/2021 and the period of duration is perpetual.

7. Principal Office

500 College Road East Suite 120				
Princeton, NJ 08540				
8. Required Rep	resentatives			
Secretary	Robert Morris	500 College Road Princeton	NJ	08540
	131	East		
			IS YI	

9. Registered Agent/Office

Registered Agents Inc. 212 N. 2nd Street STE 100 Richmond, KY 40475

I, **Robert Morris**, consent to sign for **Registered Agents Inc.** who serves as the **Registered Agent** on behalf of this Entity. on Friday, April 28, 2023

As the Authorized Representative, I, **Robert Morris**, declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct. Title: **Secretary**

P101

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1277935

Michael G. Adams

KY Secretary of State Received and Filed

Fee receipt: \$90.00

4/28/2023 8:56:49 AM