



Secretary of State
Corporation Division
255 Capitol Street NE, Suite 151
Salem, OR 97310-1327

Phone: (503) 986-2200
FAX: (503) 378-4381
sos.oregon.gov/business

PAVION CORP.
4151 LAFAYETTE CENTER DRIVE SUITE 700
CHANTILLY VA 20151

Acknowledgment Letter

The document you submitted was recorded as shown below. Please review and verify the information listed for accuracy.

Document
ARTICLES OF MERGER

Filed On
2/20/2025

Name of Survivor
PAVION CORP.

Reg. No.
224174698

Type
FBC

Jurisdiction
DE

Name(s) of Non Survivor(s)
RFI ELECTRONICS, INC. - OREGON

Reg. No.
17319112

Type
DBC

Jurisdiction
OR

Corporate Transparency Act

Visit www.FinCEN.gov/BOI for the latest information regarding beneficial ownership reporting requirements.

FILED: FEB 20, 2025
OREGON SECRETARY OF STATE

17319112-27399253

REGISTRY NUMBER:

173191-12

In accordance with Oregon Revised Statute 192.410-192.490, the information on this application is public record. We must release this information to all parties upon request and it will be posted on our website.

RFI ELECTRONICS, INC. -...

MER

Please Type or Print Legibly in Black Ink. Attach Additional Sheet if Necessary.

1. NAMES AND TYPES OF THE ENTITIES PROPOSING TO MERGE:

NAME:

ENTITY TYPE:

REGISTRY NUMBER:

RFI Electronics, Inc. - Oregon

Oregon Corporation

173191-12

Pavion Corp.

Delaware Corporation

2241746-98

2. NAME AND TYPE OF SURVIVING ENTITY: Pavion Corp., a Delaware Corporation

Check here if there is a name change in the plan of merger.

3. OREGON CORPORATION AND LIMITED LIABILITY REQUIREMENT:

- ☒ Oregon Corporations and Limited Liability Companies must include the Principal Place of Business and Individual with Direct Knowledge. Include it in your document or attach an information change form.

4. SELECT ONE OF THE FOLLOWING:

A copy of the plan of merger is attached.

OR:

- ☒ The plan of merger is on file at the address of the surviving entity.

Address 4151 Lafayette Center Drive, Suite 700

City Chantilly State VA Zip Code 20151

A copy will be provided upon request to any owner, member or shareholder at no cost.

If the plan of merger amends the articles of organization/incorporation, attach the restated articles of the surviving entity.

- ☒ State effective date and time in plan of merger if other than when these articles are filed: March 1, 2025

5. The plan of merger was duly authorized and approved by each entity that is a party to the merger:

A copy of the vote required by each entity is attached.

OR:

- ☒ Shareholder approval was not required.

6. EXECUTION: (Must be signed by an officer or director for a corporation, a member or manager for a limited liability company, a general partner for a limited partnership, or a partner for a limited liability partnership.)

I declare as an authorized signer, under penalty of perjury, that this document does not fraudulently conceal, obscure, alter, or otherwise misrepresent the identity of any person including officers, directors, employees, members, managers or agents. This filing has been examined by me and is, to the best of my knowledge and belief, true, correct and complete. Making false statements in this document is against the law and may be penalized by fines, imprisonment, or both.

Signature:

Printed Name:

Title:

Joseph Oliveri

Joseph Oliveri

President

Joseph Oliveri (Feb 13, 2025 17:23 EST)

CONTACT NAME: (To resolve questions with this filing)

PHONE NUMBER: (Include area code)

FEES

Nonprofit Required Processing Fee	\$50
Domestic Required Processing Fee	\$100
Foreign Required Processing Fee	\$275

Processing Fees are nonrefundable. Please make check payable to "Corporation Division". Free copies are available at sos.oregon.gov/business using the Business Name Search program.



Corporation/Limited Liability Company - Information Change

Secretary of State - Corporation Division - 255 Capitol St. NE, Suite 151 - Salem, OR 97310-1327 - sos.oregon.gov/business - Phone: (503) 986-2200
Please Type or Print Legibly in **Black** ink. Attach Additional Sheet if Necessary. Fax: (503) 378-4381

REGISTRY NUMBER: 173191-12

ENTITY TYPE: ☒ DOMESTIC ☐ FOREIGN

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For office use only

1. NAME OF CORPORATION OR LIMITED LIABILITY COMPANY:

RFI Electronics, Inc. - Oregon

2. BUSINESS ACTIVITY

Complete only the sections that you are updating.

3. PRINCIPAL PLACE OF BUSINESS: (Street Address)

4. THE REGISTERED AGENT HAS BEEN CHANGED TO:

5. REGISTERED AGENT'S PUBLICLY AVAILABLE ADDRESS:

Must be an Oregon Street Address, which is identical to the registered agent's office.

6. ADDRESS WHERE THE DIVISION MAY MAIL NOTICES:

4151 Lafayette Center Drive, Suite 700

Chantilly, Virginia 20151

7. THE NEW REGISTERED AGENT HAS CONSENTED TO THIS APPOINTMENT.

The entity has been notified in writing of this change.

8. THE STREET ADDRESS OF THE NEW REGISTERED OFFICE AND THE BUSINESS ADDRESS OF THE REGISTERED AGENT ARE IDENTICAL.

9. INDIVIDUAL WITH DIRECT KNOWLEDGE (Names and Addresses)

List the name and address of at least one individual who is a director, or controlling shareholder of the corporation (member or manager of the LLC) or an authorized representative with direct knowledge of the operations and business activities of the corporation or LLC.

Joseph Oliveri

4151 Lafayette Center Drive, Suite 700

Chantilly, Virginia 20151

10. NAME(S) AND ADDRESS(ES) OF CORPORATE OFFICERS OR LLC MEMBERS/MANAGERS

Business and Professional Corporations list the name and address of one President and one Secretary (ORS 60.787, ORS 62.455, ORS 554.315).

Nonprofit Corporations list the name and address of one President and one Secretary. Nonprofit Corporations that are Public Benefit list the name and address of one Treasurer (ORS 65.371).

Limited Liability Companies list the names and addresses of the managers for a manager-managed limited liability company or the name and address of at least one member for a member-managed limited liability company (ORS 63.787). Please attach a separate sheet of paper if needed.

If making changes to this section, list all current names and addresses. This replaces what is currently on the record.

PRESIDENT OR OWNER(S) (MEMBERS):

(Names and Addresses)

Joseph Oliveri

4151 Lafayette Center Drive, Suite 700

Chantilly, Virginia 20151

SECRETARY OR MANAGER(S):

(Names and Addresses)

Cicily Wright

4151 Lafayette Center Drive, Suite 700

Chantilly, Virginia 20151

TREASURER - NONPROFIT ONLY:

(Name and Address)

11. EXECUTION: I declare as an authorized signer, under penalty of perjury, that this document does not fraudulently conceal, obscure, alter, or otherwise misrepresent the identity of any person including officers, directors, employees, members, managers or agents. This filing has been examined by me and is, to the best of my knowledge and belief, true, correct and complete. Making false statements in this document is against the law and may be penalized by fines, imprisonment, or both.

SIGNATURE:

Joseph Oliveri
Joseph Oliveri (Feb 13, 2025 17:23 EST)

PRINTED NAME:

Joseph Oliveri

TITLE:

President

CONTACT NAME: (To resolve questions with this filing)

PHONE NUMBER: (Include area code)

FEES

No Processing Fee

Free copies are available at sos.oregon.gov/business using the Business Name Search program.