

Form ID: Application for EDGAR Access

Applicant Type

Filer

Indicate whether the applicant is a company or individual

☒ Company ☐ Individual

Access codes will be used to submit draft registration or draft offering statement.

☐

Note: The Name of Applicant must be in English! Please enter the name of applicant as specified in its charter. Also, the value that you enter below may be conformed to meet EDGAR standards. Click here for details.

Name of Applicant :

AVALON SECURITIES, LTD.

Mailing Street 1

276 WATER STREET

Mailing Street 2

SUITE 650

Mailing City

NEW YORK

Mailing State/Country

NY

Mailing Zip/Postal Code

10038

Phone

9175390006

Note: If the potential filer does not have a TIN, enter "00-0000000" below.

Tax Identification Number (TIN)(DD-DDDDDDD)

Form ID: Filer Information

Refer to Volume I of the [EDGAR Filer Manual](#) for instructions on how to complete this section.

"Doing Business As" Name :

AVALON SECURITIES, LTD.

Note: The Foreign Name is intended to be the name of your company in any language other than English.

Foreign Name :

Business address same as mailing address. Business address is required if not the same.

☐

Business Street 1

530 FIFTH AVENUE

Business Street 2

9TH FLOOR

Business City

NEW YORK

Business State/Country

NY

Business Zip/Postal Code

10036

State of Incorporation

NY

Fiscal Year End (MM/DD)

12/31

Form ID: Contact Information

Contact for EDGAR Information, Inquiries, and Access Codes

Refer to Volume I of the [EDGAR Filer Manual](#) for instructions on how to complete this section.

Contact Name

Lynda Davey

Contact address same as Registrant General Information address. Contact address is required if not the same.

☒

Contact Street 1

Contact Street 2

Contact City

Contact State/Country

Contact Zip/Postal Code

Contact Phone

9175390006

Note: The E-mail address below is where your new CIK will be sent after form submission and review. It is very important that you enter it correctly. To help ensure accuracy, you must enter it twice.

E-mail Address

LDavey@AvalonNetWorth.com

Re-enter E-mail Address

LDavey@AvalonNetWorth.com

Contact for SEC Account Information and Billing Invoices

Refer to Volume I of the [EDGAR Filer Manual](#) for instructions on how to complete this section.

Contact Name

Lynda Davey

Contact address same as Registrant General Information address. Contact

☒

address is required if not the same.


Contact Street 1	<div></div>
Contact Street 2	<div></div>
Contact City	<div></div>
Contact State/Country	<div></div>
Contact Zip/Postal Code	<div></div>
Contact Phone	<div></div>

Form ID: Signature

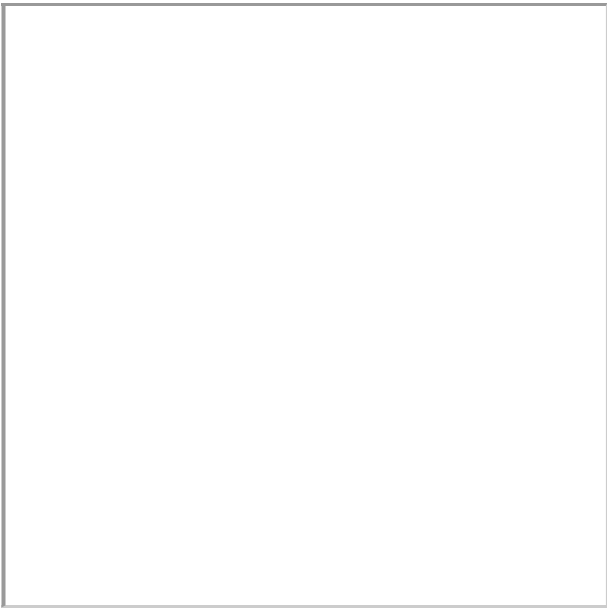
Note: Only a duly authorized person - such as a partner, president, treasurer, corporate secretary, officer, or director - may sign this application on behalf of the applicant.
Refer to Volume I of the [EDGAR Filer Manual](#) for instructions on how to complete this section. If applicant is an individual, the applicant must sign the Form.

Signature	<div>Lynda Davey</div>
Date (MM/DD/YYYY)	<div>03/28/2022</div>
Title/Position	<div>Chief Executive Officer</div>

Form ID: Notarized Authentication

Signature of Authorized Person	<div></div>
Printed Name of Signature	<div>Lynda Davey</div>
Title of Person Signing	<div>Chief Executive Officer</div>

Notary Signature & Seal to be Placed Here



address is required if not the same.

Contact Street 1

Contact Street 2

Contact City

Contact State/Country

Contact Zip/Postal Code

Contact Phone

Form ID: Signature

Note: Only a duly authorized person - such as a partner, president, treasurer, corporate secretary, officer, or director - may sign this application on behalf of the applicant. Refer to Volume I of the EDGAR Filer Manual for instructions on how to complete this section. If applicant is an individual, the applicant must sign the Form.

Signature

Lynda Davey

Date (MM/DD/YYYY)

03/25/2022

Title/Position

Chief Executive Officer

Form ID: Notarized Authentication

Signature of Authorized Person

Printed Name of Signature

Lynda Davey

Title of Person Signing

Chief Executive Officer

Notary Signature & Seal to be Placed Here

Sanjeev Kumar
Notary Public, State of New York
No. 01KU5074801
Qualified/Certification Filed in Queens County
Commission Expires March 24, 2023