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(Address)
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SECRETARY OF STATE.
TALLAHASSEE, FLORIDA

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COVER LETTER

		iling Section on of Corporations									
SUBJEC	CT:	ASRC Primus Solutions, Inc									
SCDOLC	-1.	(Name of corporation - must include suffix)									
Dear Sir c	or Ma	ndam:									
"Certifica	ate of	'Application by Foreign Corporation for Authorization to Transact Business in Existence," and check are submitted to register the above referenced foreign cass in Florida.	Florid orporat	a," tion to							
Please ret	turn a	Il correspondence concerning this matter to the following:									
Donna W	/este	r									
-	,	(Name of Person)									
Primus \$	olutio	ons, Inc									
		(Firm/Company)	Z E	200							
6303 lvy l	, Suite #130	CRE	3SE								
	TAI	2009 SEP 28									
Greenbel	It, MC	20770	SEE Y (
For furthe	er inf	(City/State and Zip code) formation concerning this matter, please call:	FLORIDA	PH 2: 25							
Donna W	'ester	at (301) 837-5441									
((Nam	e of Person) (Area Code & Daytime Telephone Number)									
N D C 2	New F Divisi Clifto 2661 1	ET/COURIER ADDRESS: Siling Section On of Corporations On Building Executive Center Circle Classee, FL 32301 MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314									
Enclosed	lisad	check for the following amount:									
₹ 70.00) Filir		cate of	Status &							

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.

Inc.," "Co.," "C	orporation; must include "INCORPORAT orp," "Inc," "Co," or "Corp.") Solution, Inc	ED,	" "COMPANY," "CORPORATION,"			
	Solution, Inc					
If name unavail						
	able in Florida, enter alternate corporate na	me	adopted for the purpose of transacting busin	ess in Flo	rida)	
Maryland		3.	54-2014187			
State or country	under the law of which it is incorporated)	- J.	(FEI number, if applicable)			
11/4/1998		5.	Perpetual			
(Date	of incorporation)	٥.	(Duration: Year corp. will cease to exist o	r "perpetu	al")	
October 1,2009	9					
303 Ivy Lane,	Suite #130, Greenbelt, MD 20770					
	The second secon	add	ress)			
303 Ivy Lane,	Suite #130, Greenbelt, MD 20770					
	(Current mailing	add	ress)			
Administration	Support, Supply/Fuels, Custodial Servi	ice.	Communications and Transportation Se	rvice de	. 2	
				<u> </u>	-8	
			·	HAS	SEP ;	MA JORGE
Name:	NRAI Services, Inc.		<u> </u>	SEE,		7
ice Address:	2731 Executive Park Dr., Ste 4		<u></u>	200 1.08 1.74	$\ddot{\mathcal{S}}$	
	Weston		Fiorida 33331		25	
	(City)		(Zip code)			
ving been nam ignated in this ther agree to c ! I am familiar	ted as registered agent and to accept so application, I hereby accept the appo omply with the provisions of all statute with and accept the obligations of my	intn es r	nent as registered agent and agree to ac elative to the proper and complete perfo	t in this (capacit	y. I
i i viii	303 lvy Lane, Administration (Purpose(s) Name and street Name: Ice Address: Registered apping been name ignated in this ther agree to c. I am familian	(SEE SECTIONS 607.1501 & 60 303 Ivy Lane, Suite #130, Greenbelt, MD 20770 (Principal office 303 Ivy Lane, Suite #130, Greenbelt, MD 20770 (Current mailing Administration Support, Supply/Fuels, Custodial Serv (Purpose(s) of corporation authorized in home state of Name and street address of Florida registered agent: (Name: NRAI Services, Inc. 2731 Executive Park Dr., Ste 4 Weston (City) Registered agent's acceptance: Ping been named as registered agent and to accept so a gented in this application, I hereby accept the appointment of the provisions of all statute in the provisions of all statute.	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.15	(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 303 lvy Lane, Suite #130, Greenbelt, MD 20770 (Principal office address) 303 lvy Lane, Suite #130, Greenbelt, MD 20770 (Current mailing address) Administration Support, Supply/Fuels, Custodial Service, Communications and Transportation Se (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: NRAI Services, Inc. 1. The state of Florida and to accept service of process for the above stated corporation been named as registered agent and to accept service of process for the above stated corporation been named as registered agent and agree to accept agree to compity with the provisions of all statutes relative to the proper and complete perform a maintain and accept the obligations of my position as registered agent.	(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 303 lvy Lane, Suite #130, Greenbelt, MD 20770 (Principal office address) 303 lvy Lane, Suite #130, Greenbelt, MD 20770 (Current mailing address) Administration Support, Supply/Fuels, Custodial Service, Communications and Transportation Service (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) Name: Name: NRAI Services, Inc. Ce Address: NRAI Services, Inc. (City) Registered agent's acceptance: Ing been named as registered agent and to accept service of process for the above stated corporation at ignated in this application, I hereby accept the appointment as registered agent and agree to act in this ther agree to compily with the provisions of all statutes relative to the proper and complete performance I am familiar with and accept the obligations of my position as registered agent.	(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 303 lvy Lane, Suite #130, Greenbelt, MD 20770 (Principal office address) 303 lvy Lane, Suite #130, Greenbelt, MD 20770 (Current mailing address) Administration Support, Supply/Fuels, Custodial Service, Communications and Transportation Service Street Communications and Transportat

11. 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.

12. Names and business addresses of officers and/or directors:

	ECTORS			
Chairman	Carl Werner			
Address:	6303 Ivy Lane, Suite #130, Greenbelt, MD 20770	- · - · ·		
,			<u></u>	
Vice Chai	irman:			
Address:				
Director:	Rick Payne			
Address:	6303 Ivy Lane, Suite #130, Greenbelt, MD 20770		<u></u> .	
Director:				
Address:				
в. off	ICERS	SECR	2009 SI	City
President	Rick Payne	HAS	SEP 2	F04
Address:	6303 Ivy Lane, Suite #130, Greenbelt, MD 20770	SEE, F	8	<u> </u>
		5	<u> </u>	(Contraction
Vice Pres	sident: Erik Edwardson		25	
Address:	6303 Ivy Lane, Suite #130, Greenbelt, MD 20770			
	Erik Edwardson			
Secretary	6303 lvv Lane Suite #130 Greenhelt MD 20770	_		
Address:	Frik Edwardson			
Treasure	6303 by Lane Suite #130 Greenhelt MD 20770			
Address:				
NOTE:	If necessary, you may attach an addendum to the application listing additional officers and/	or directo	rs.	
13	The King			
14	(Signature of Director or Officer listed in number 12 of the application)			
14	(Typed or printed name and capacity of person signing application)			

STATE OF MARYLAND Department of Assessments and Taxation

I, PAUL B. ANDERSON OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO THE FORFEITURE OR SUSPENSION OF CORPORATIONS, OR THE RIGHTS OF CORPORATIONS TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT PRIMUS SOLUTIONS, INC. IS A CORPORATION DULY INCORPORATED AND EXISTING UNDER AND BY VIRTUE OF THE LAWS OF MARYLAND AND THE CORPORATION HAS FILED ALL ANNUAL REPORTS REQUIRED, HAS NO OUTSTANDING LATE FILING PENALTIES ON THOSE REPORTS, AND HAS A RESIDENT AGENT. THEREFORE, THE CORPORATION IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING WITH THIS DEPARTMENT AND DULY AUTHORIZED TO EXERCISE ALL THE POWERS RECITED IN ITS CHARTER OR CERTIFICATE OF INCORPORATION, AND TO TRANSACT BUSINESS IN MARYLAND.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS SEPTEMBER 17, 2009.

Paul B. Anderson Charter Division



301 West Preston Street, Baltimore, Maryland 21201 Telephone Balto. Metro (410) 767-1340 / Outside Balto. Metro (888) 246-5941 MRS (Maryland Relay Service) (800) 735-2258 TT/Voice Fax (410) 333-7097