Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

MAY 12 2010

From:

Account Name

: C T CORPORATION SYST Account Number : FCA000000023

Phone Fax Number : (850)222-1092

: (850)878-5368

XAMINER

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:
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Foreign Limited Liability Company CenTauri Solutions LLC

Certificate of Status	υ
Certified Copy	0
Page Count	05
Estimated Charge	\$125.00

COVER LETTER

	Name of Limited Liability Company and Liability Company for Authorization to the above referenced foreign limited his this matter to the following: Jim Mortson Name of Person CenTauri Solutions LLC Firm/Company	
tunce, and check are submitted to registe	er the above referenced foreign limited lia this matter to the following: Jim Mortson Nume of Person CenTuuri Solutions LLC	
se return all correspondence concerning	Jim Mortson Nume of Person CenTuuri Solutions LLC	
	Nume of Person CenTuuri Solutions LLC	
·	CenTuuri Solutions LLC	
	Kirm/Campung	
	Funscompany	
	675 N Washington St, Ste 400	
	Address	
	Alexandria, VA 22314	
	City/State and Zip Code	
	jim.mortson@centauri-sulutions.com	
	ress; (to be used for future annual report t	withcation
urther information concerning this matte	r, please cull:	
Jim Mortson	at (703)	650-0859
Name of Person	Area Code & Daytime Teleph	one Number
MAILING ADDRESS:	STREET ADDRESS:	
Division of Corporations	Division of Corporations	
Registration Section P.O. Box 6327	Registration Section Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle	
	Tallahassee, FL 32301	•
osed is a check for the following a	nmount;	
∑ \$125.00 Filing Fee	Filing Fee & S155.00 Filing Fee &	2 S160.00 Filing Fee, Cortificate

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION (UR.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: CenTauri Solutions LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the ulternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.") State of Delaware (Jurisdiction under the law of which foreign limited liability (PEI number, if applicable) company is organized) January 3rd, 2006 Perpetual (Dute of Organization) (Duration: Year limited liability company will coase to exist or "perpetual") (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 7. 675 N Washington St, Ste 400, Alexandria, VA 22314 (Street Address of Principal Office) 8. If limited liability company is a manager-managed company, check here 9. The name and usual business addresses of the managing members or managers are as follows: Glenn Beach, 675 N Washington St, Ste 400, Alexandria, VA 22314; Jim Kelly, 675 N Washington St, Ste 400, Alexandria, VA 22314; Robert Kolly, 675 N Washington St, Ste 400, Alexandria, VA 22314; Michael Yermakov, 675 N Washington St, Sto 400, Alexandria, VA 22314 10. Attriched is an original catificate of existence, no more than 90 days old, duly authoriticated by the official having custody of records in the jurisdiction, under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under coth of the translator must be submitted.) Cousulting Services 11. Nature of business or purposes to be conducted or promoted in Florida: Signature of a member or an authorized representative of a member, (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true,) James M. Mortson

Typed or printed name of signee

FLUST - 05/04/2009 C'Y Systems (Jelling

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608,415 or 608,507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

	of the Limited Liability Com	•	
	Ccn'i	'auri Solutions LLC	
If unavailable	, the alternate to be used in th	e state of Florida is:	
·	· c	TSolutions LLC	·
2. The name	and the Florida street address	of the registered agent and office	are:
		Corporation System	
	·	(Name)	
		South Pine Island Road	
•	Florida Street Add	ross (P.O. Box NOT ACCEPTABLE)	
	Plantation	FL 33324	
		City/State/Zip	
liability compa agent and agre relating to the j obligations of t	ny at the place designated in the to act in this capacity. I furth proper and complete performany position as registered agent	o accept service of process for the o his certificate, I hereby accept the a her agree to comply with the provis nce of my duties, and I am familiar as provided for in Chapter 608, Fl	ppointment as registered ions of all statutes with and accept the
ву:	Corporation System (Signature)	Anusha Vice Pre and Assistan	
	\$ 100,00	Filing Fee for Application	
	\$ 25.00	Designation of Registered Ager	ıt

\$ 30.00 Certified Copy (optional)
 \$ 5.00 Certificate of Status (optional)

Delaware

PAGE '

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CENTAURI SOLUTIONS LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TENTH DAY OF MAY, A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY TRAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

4088100 8300

100487095

Jeffrey W. Bullock, Secretary of State

AUTHENTYCATION: 7983144

DATE: 05-10-10

You may verify this cartificate online at corp.delaware.gov/authver.ehtml