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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

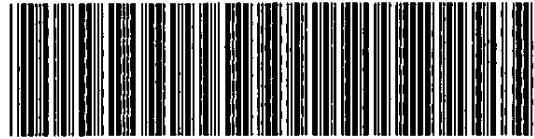
(Business Entity Name)

(Document Number)

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TALLAHASSEE FLORIDA

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COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Nakuuruq Solutions, LLC  
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

Ashley Rorrer

Name of Person

Akima

Firm/Company

13873 Park Center Road, Suite 400N

Address

Herndon, VA 20171

City/State and Zip Code

ashley.rorrer.ctr@akima.com

E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

Ashley Rorrer

Name of Contact Person

at ( 571 )

Area Code

482-5331

Daytime Telephone Number

**MAILING ADDRESS:**

Division of Corporations  
Registration Section  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET ADDRESS:**

Division of Corporations  
Registration Section  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Enclosed is a check for the following amount:

\$125.00 Filing Fee

\$130.00 Filing Fee &  
Certificate of Status

\$155.00 Filing Fee &  
Certified Copy

\$160.00 Filing Fee, Certificate  
of Status & Certified Copy

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Nakuuruq 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. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. Alaska 3. 90-0127304  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. January 1, 2005  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 13873 Park Center Road, Suite 400N  
Herndon, VA 20171  
(Street Address of Principal Office)

6. 13873 Park Center Road, Suite 400N  
Herndon, VA 20171  
(Mailing Address)

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7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:  
Donald Atwell, President; Allen Ticket Sr., Secretary/Treasurer; Larry Mechner, Assistant Secretary; Richard Headrick, Assistant Treasurer  
13873 Park Center Road, Suite 400N, Herndon, VA 20171

8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated 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 oath of the translator must be submitted)

Ashley Rorrer  
Signature of an authorized person

(In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Ashley Rorrer  
Typed or printed name of signee

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

**Nakuuruq Solutions, LLC**

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If unavailable, the alternate to be used in the state of Florida is:

**Nakuuruq, LLC**

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2. The name and the Florida street address of the registered agent and office are:

**C T Corporation System**

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(Name)

**1200 South Pine Island Road**

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Florida Street Address (P.O. Box NOT ACCEPTABLE)

**Plantation**

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**FL**

**33324**

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City/State/Zip

*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, Florida Statutes.*



(Signature)

**Todd B. Proper**  
Vice President and Assistant Secretary

**\$ 100.00 Filing Fee for Application**  
**\$ 25.00 Designation of Registered Agent**  
**\$ 30.00 Certified Copy (optional)**  
**\$ 5.00 Certificate of Status (optional)**

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ALLAHASSEE FLORIDA

**FILED**

Alaska Entity #83902D

State of Alaska  
Department of Commerce, Community and Economic Development  
Corporations, Business and Professional Licensing

## Certificate of Compliance

The undersigned, as Commissioner of Commerce, Community and Economic Development of the State of Alaska, and custodian of corporation records for said state, hereby issues a Certificate of Compliance for:

**NAKUURUQ SOLUTIONS, LLC**

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CLERK OF STATE  
TALLAHASSEE FLORIDA

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This entity was formed on December 05, 2003 and is in good standing. This entity has filed all biennial reports and fees due at this time.

No information is available in this office on the financial condition, business activity or practices of this corporation.



IN TESTIMONY WHEREOF, I execute the certificate and affix the Great Seal of the State of Alaska effective March 14, 2013.

Susan K. Bell  
Commissioner