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SECRETARY OF STATE

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COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: Orizon, Inc.		
	poration - must include suffix	
Dear Sir or Madam:		
The enclosed "Application by Foreign Corpora "Certificate of Existence," or "Certificate of Go above referenced foreign corporation to transac	ood Standing" and check are subm	
Please return all correspondence concerning thi	is matter to the following:	
Shari Lerner		
N	lame of Person	
Orizon, Inc.		
Fi	rm/Company	
51 Monroe Street, Suite 16	00	
	Address	
Rockville, MD 20850		
City	/State and Zip code	
slerner@orizon-inc.com		
E-mail address: (to b	e used for future annual report no	tification)
For further information concerning this matter,	please call:	
Shari Lerner at (301) 309-2300 x810	1
Name of Person	Area Code & Daytime Telephor	
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Enclosed is a check for the following amount:	MAILING AD New Filing Sect Division of Cor P.O. Box 6327 Tallahassee, FL	tion porations
\$70.00 Filing Fee Certificate of State	& \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy

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.

1. Orizo	on, Inc.			
	name of corporation; must include "INCORPORATED" "Co.," "Corp," "Inc," "Co," or "Corp."))," "COMPANY," "CORPORATION,"		
(If nam	e unavailable in Florida, enter alternate corporate name	ne adopted for the purpose of transacting business in Florida)		
2. Mary	land 3	52-2123557		
	r country under the law of which it is incorporated)	(FEI number, if applicable)		
4. April	5, 1996	Perpetual		
	(Date of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")		
6. July	1, 2013			
•		in Florida, if prior to registration) 1502, F.S., to determine penalty liability)		
7. <u>51 N</u>	lonroe Street, Suite 1600, Rocky	/ille, MD 20850 ಕ್ಷಣ ಪ		
	(Principal office ad	ldress)		
51 Monroe Street, Suite 1600, Rockville, MD 20850				
	(Current mailing ad			
a Info	mation Technology Services			
	Purpose(s) of corporation authorized in home state or c	country to be carried out in state of Florida)		
`	• ''	1 5		
9. Name	and street address of Florida registered agent: (P.	.O. Box NOT acceptable)		
1	Name: Registered Agents Inc.			
Office Ac	Idress: 3030 N. Rocky Point Dr. STE 1	<u>150A</u>		
	Tampa	, Florida 33607		
	(City)	(Zip code)		

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Dan Keen-President
(Registered agent's signature)

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:	
A. DIRECTÓRS	ভ ভ অনুসক্ষার বিভাগন সংস্থান
Chairman:	13 (UL 10 PH 4: 05
Address:	SECRETARY OF STATE TACEAHASSEE FEORIDA
Vice Chairman:	***************************************
Address:	
Director: Romero van Bochove	
Address: 9808 Old Spring Road, Kensington, MD 26	0895
Director: Michael McLean	
Address: 3370 NE 190th, Apt 2711, Miami, FL 33	180
B. OFFICERS	The state of the s
President: Romero van Bochove	
Address: 9808 Old Spring Road, Kensington, MD 20895	
Vice President: Michael McLean	
Address: 3370 NE 190th Street, Apt 2711, Miami, FL 33	180
Secretary: Michael McLean	
Address: 3370 NE 190th Street, Apt 2711, Miami, FL 33180	
Treasurer: Romero van Bochove	
Address: 9808 Old Spring Road, Kensington, MD 20895	
NOTE: If necessary, you may attach an addendum to the application listing ad	dditional officers and/or directors.
Signature of Director or Officer	
The officer or director signing this document (and who is listed in number 12 a are true and that he or she is aware that false information submitted in a document third degree felony as provided for in s.817.155, F.S.	

14. Romero van Bochove

STATE OF MARYLAND Department of Assessments and Taxation



13 JUL 10 PM 4: (

SEORETARY OF STAT FALLAHASSEE FLORI

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 ORIZON, INC., INCORPORATED APRIL 05, 1996, 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 JULY 05, 2013.

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