

F010000004229

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LAM ASSOCIATES, INC.

(Name of corporation - must include suffix)

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-07/30/01--01039--010
*****78.75 *****78.75

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

GALE M. SAMPSON

(Name of Person)

LAM ASSOCIATES, INC.

(Firm/Company)

8245 BOONE BOULEVARD SUITE 200

(Address)

VIENNA, VA 22182

(City/State and Zip code)

For further information concerning this matter, please call:

GALE M. SAMPSON

(Name of Person)

at (703) 442-9830

(Area Code & Daytime Telephone Number)

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

☐ \$70.00 Filing Fee

☒ \$78.75 Filing Fee &
Certificate of Status

☐ \$78.75 Filing Fee &
Certified Copy

☐ \$87.50 Filing Fee,
Certificate of Status &
Certified Copy

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

5P



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

August 1, 2001

GALE M. SAMPSON
LAM ASSOCIATES, INC.
8245 BOONE BOULEVARD SUITE 200
VIENNA, VA 22182

SUBJECT: LAM ASSOCIATES, INC.
Ref. Number: W01000017693

We have received your document for LAM ASSOCIATES, INC. and your check(s) totaling \$78.75. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6958.

Lee Rivers
Document Specialist

Letter Number: 801A0004434

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

**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. LAM ASSOCIATES, INC.
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. DISTRICT OF COLUMBIA 3. 54-1085493
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. JUNE 8, 1978 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. UPON QUALIFICATION
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 8245 BOONE BOULEVARD, SUITE 200, VIENNA, VA 22182
(Principal office address)
SAME
(Current mailing address)
8. FACILITIES MANAGEMENT, INFORMATION TECHNOLOGY
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)
Name: ROBERT FITZGERALD
Office Address: 4696 SWEET MEADOW CIRCLE
SARASOTA, Florida 34238
(City) (Zip code)

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TALLAHASSEE

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.


(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. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

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TALLAHASSEE FLORIDA

B. OFFICERS

President: LOTA A. MUSHAW

Address: 3210 UPPER WYNNEWOOD PLACE

OAK HILL, VA 20171

Vice President: _____

Address: _____

Secretary: TODD C. MUSHAW

Address: 3210 UPPER WYNNEWOOD PLACE

Treasurer: OAK HILL, VA 20171

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. *Lotia A. Mushaw*

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. LOTA A. MUSHAW, PRESIDENT & CEO

(Typed or printed name and capacity of person signing application)

GOVERNMENT OF THE DISTRICT OF COLUMBIA
DEPARTMENT OF CONSUMER AND REGULATORY AFFAIRS



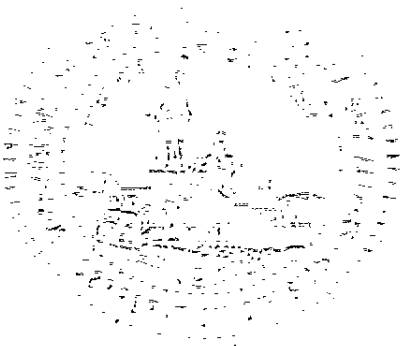
C E R T I F I C A T E

THIS IS TO CERTIFY that there were received and accepted for record in the Department of Consumer and Regulatory Affairs, Corporations Division, on the 8th day of June, 1978 *Articles of Incorporation of:*

LAM ASSOCIATES, INC.

WE FURTHER CERTIFY that the above named corporation is in Good Standing and duly incorporated and existing according to the records of Corporations Division, having filed all reports as required by the District of Columbia Business Corporation Act.

IN TESTIMONY WHEREOF I have hereunto set my hand and caused the seal of this office to be affixed this 29th day of June, 2001.



David Clark
Acting Director

Winnie R. Huston
Administrator
Business Regulation Administration

A handwritten signature in dark ink, appearing to read "Maxine M. Hinson".

Maxine M. Hinson
Act. Assistant Superintendent of Corporations
Corporations Division

Anthony A. Williams
Mayor

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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