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Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 205-0383

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 222-9428

FOREIGN PROFIT QUALIFICATION

Northrop Grumman Federal Civil Systems, Inc.

Certificate of Status	0
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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. NORTHROP GRUMMAN FEDERAL CIVIL SYSTEMS, INC.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Delaware 3. 54-2131165
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 11/03/2003 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. 1840 Century Park East, Los Angeles, CA 90067
(Principal office address)

same
(Current mailing address)

8. 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: C T Corporation System

Office Address: c/o C T Corporation System, 1200 South Pine Island

Plantation, Florida 33324
(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.

C T Corporation System

By: [Signature]

(Registered agent's signature)

M.T. FITZPATRICK
ASSISTANT SECRETARY

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:

FILED**A. DIRECTORS SEE ATTACHMENT**

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Gary W. McKenzieAddress: 1840 Century Park EastLos Angeles, CA 90067Director: John H. MullanAddress: 1840 Century Park EastLos Angeles, CA 90067**B. OFFICERS SEE ATTACHMENT**President: Albert F. MyersAddress: 1840 Century Park EastLos Angeles, CA 90067Vice President: Gary W. McKenzieAddress: 1840 Century Park EastLos Angeles, CA 90067Secretary: Kathleen M. SalmasAddress: 1840 Century Park East Los Angeles, CA 90067

Treasurer: _____

Address: _____

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

13. Kathleen M. Salmas

(Signature of Director or Officer listed in number 12 of the application)

14. Kathleen M. Salmas, Secretary

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

Attachment to Florida
Officers & Directors

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1. Full Name: Gary W. McKenzie
 Officer/Director: Officer, Director
 Officer's Title: Vice President
 Director's Title: Other Director
 Business Address: 1840 Century Park East
 City: Los Angeles
 State: CA
 ZIP Code: 90067
2. Full Name: Albert P. Myers
 Officer/Director: Officer, Director
 Officer's Title: President
 Business Address: 1840 Century Park East
 City: Los Angeles
 State: CA
 ZIP Code: 90067
3. Full Name: Kathleen M. Salmas
 Officer/Director: Officer
 Officer's Title: Secretary
 Business Address: 1840 Century Park East
 City: Los Angeles
 State: CA
 ZIP Code: 90067
4. Full Name: James L. Sanford
 Officer/Director: Officer
 Officer's Title:
 Business Address: 1840 Century Park East
 City: Los Angeles
 State: CA
 ZIP Code: 90067

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Delaware

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TALLAHASSEE, FLORIDA

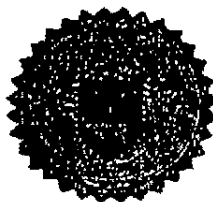
I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "NORTHROP GRUMMAN FEDERAL CIVIL SYSTEMS, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FIFTEENTH DAY OF MARCH, A.D. 2004.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

3723221 8300

040189014

*Harriet Smith Windsor*
HARRIET SMITH WINDSOR
20040315

DATE: 03-15-04

TOTAL P.05