F09000004831

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

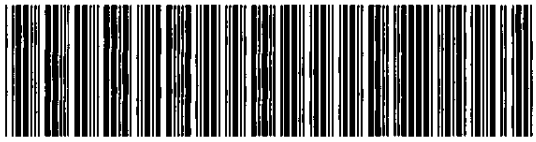
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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TALLAHASSEE, FLORIDA

McKnight DEC 08 2009

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Same as Above
Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" 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:

Debra Lukin
Name of Person

Koniag Services, Inc.
Firm/Company

4300 B St., Suite 408
Address

Anchorage, Alaska 99503
City/State and Zip code

Dlukin@koniagdevelopment.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Debra Lukin at (907) 261-4040
Name of Person — Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:
New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:
New Filing 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

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. Koniag Services, 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. Alaska
(State or country under the law of which it is incorporated)

3. 92-0152228
(FEI number, if applicable)

4. 06-13-1994
(Date of incorporation)

5. perpetual
(Duration: Year corp. will cease to exist or "perpetual")

6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 4300 B St., Suite 408, Anchorage, Alaska 99503
(Principal office address)

Same as Above
(Current mailing address)

8. IT Services
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

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9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: NRAI Services, Inc.

Office Address: 2731 Executive Park Drive, Suite 4

Weston (City), Florida 33331 (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.

NRAI Services, Inc.

By: Matt Thompson Matt Thompson, Assistant Secretary
(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: Thomas H. Panamaroff

Address: 4300 B St., Suite 408, Anchorage, AK 99a503

Vice Chairman:

Address:

Director: Perry Eaton

Address: 4300 B St., Suite 408, Anchorage, AK 99503

Director:

Address:

B. OFFICERS

President: Steve Letts

Address: 4100 Lafayette Center Dr., Suite 110, Chantilly, VA 20151-1234

Vice President:

Address:

Secretary: Assistant Secretary - Debra Lukin

Address: 4300 B St., Suite 408, Anchorage, AK 99503

Treasurer: & Secretary - Brent Parsons

Address: 4300 B St., Suite 408, Anchorage, AK 99503

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

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

14. Debra Lukin, Assistant Secretary
(Typed or printed name and capacity of person signing application)

Alaska Entity # **54123D**

State of Alaska
Department of Commerce, Community, and Economic Development

CERTIFICATE
OF
GOOD STANDING

THE UNDERSIGNED, as Commissioner of Commerce, Community, and Economic Development of the State of Alaska, and custodian of corporation records for said state, hereby certifies that

KONIAG SERVICES, INC.

on the 13th day of June, 1994 filed in this office its Articles of Incorporation, as a Business Corporation organized under the laws of this state.

I FURTHER CERTIFY that said Business Corporation is in good standing, having fully complied with all the requirements of this office.

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

IN TESTIMONY WHEREOF, I execute this certificate and affix the Great Seal of the State of Alaska on the 2nd day of December, 2009.

Emil Notti
Commissioner

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TALLAHASSEE, FLORIDA

Certification Number: 361255-1
Verify this certificate online at https://myalaska.state.ak.us/business/soskb/verify.asp