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Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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(((H10000012326 3)))



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To:

Division of Corporations  
Fax Number : (850) 617-6381

From:

Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (850) 222-1092  
Fax Number : (850) 878-5368

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**FILED**  
10 JAN 19 PM 3:46  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## FOREIGN PROFIT/NONPROFIT CORPORATION

TexelTek, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	06 1
Estimated Charge	\$870.00

**RECEIVED**  
10 JAN 21 PM 4:38  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

GP 1/22/10



January 20, 2010

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

CT CORP

SUBJECT: TEXELTEK, INC.  
REF: W10000002833

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refax this document until the quality has been improved.

If you have any further questions concerning your document, please call (850) 245-6931.

Becky McKnight  
Regulatory Specialist II  
New Filing Section

FAX Aud. #: H10000012326  
Letter Number: 510A00001503

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## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** TexelTek, Inc.

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:

Marybeth Steil

Name of Person

TexelTek, Inc.

Firm/Company

6716 Alexander Bell Dr., Suite 200

Address

Columbia, MD 21046

City/State and Zip code

miross@texeltek.com

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

For further information concerning this matter, please call:

Marybeth Steil

Name of Person

at ( 301 ) 880-7162

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 Cop

☐ \$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. TexelTek, 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. 52-2266478  
(State or country under the law of which it is incorporated) (FBI number, if applicable)

4. 07/19/2000 5. Perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. 03/28/2008  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 6716 Alexander Bell Drive, Suite 200, Columbia, MD 21046  
(Principal office address)

same  
(Current mailing address)

8. to engage in any lawful act or activity  
(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 NOT acceptable)

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

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.*

By: [Signature] Mark J. [Signature] V President  
(Registered agent's signature) Asst. Sec. of State

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.

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12. Names and business addresses of officers and/or directors:

**A. DIRECTORS SEE ATTACHMENT**

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

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**B. OFFICERS SEE ATTACHMENT**

President: Mark L. Ross

Address: 6716 Alexander Bell Drive, Suite 200

Columbia, MD 21046

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: \_\_\_\_\_

Address: \_\_\_\_\_

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

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

13. [Signature]

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

14. Richard Rowe, Vice President

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

**Attachment to Florida  
Officers & Directors**

- 1 Full Name: Richard Rowe  
Officer/Director: Officer, Director  
Officer's Title: CFO and VP - Contracts Administration  
Director's Title: Director  
Business Address: 6716 Alexander Bell Drive, Suite 200  
City: Columbia  
State: MD  
ZIP Code: 21046
- 2 Full Name: Jason Flynn  
Officer/Director: Officer, Director  
Officer's Title: CTO and VP - Product Development  
Director's Title: Director  
Business Address: 6716 Alexander Bell Drive, Suite 200  
City: Columbia  
State: MD  
ZIP Code: 21046
- 3 Full Name: Charles Watley  
Officer/Director: Officer, Director  
Officer's Title: VP - Administration and Secretary  
Director's Title: Director  
Business Address: 6716 Alexander Bell Drive, Suite 200  
City: Columbia  
State: MD  
ZIP Code: 21046
- 4 Full Name: Mark L. Ross  
Officer/Director: Officer, Director  
Officer's Title: President & CEO  
Director's Title: Director  
Business Address: 6716 Alexander Bell Drive, Suite 200  
City: Columbia  
State: MD  
ZIP Code: 21046

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# Delaware

PAGE 1

*The First State*

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TEXELTEK, 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 JANUARY, A.D. 2010.

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.

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TALLAHASSEE, FLORIDA

3261380 8300

100045604

You may verify this certificate online  
at [corp.delaware.gov/authover.shtml](http://corp.delaware.gov/authover.shtml)



  
Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 7762976

DATE: 01-15-10