

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H10000027633 3)))



H100000276333ABCW

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

TO:

Division of Corporations

Fax Number : (850) 617-6381

From;

Account Name ; C T CORPORATION SYSTEM

Account Number : FCA000000023 : (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.\*\*

Ems+1	Address:				
	MANY 400 .				 

## FOREIGN PROFIT/NONPROFIT CORPORATION

CHUGACH GOVERNMENT SERVICES, INC.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$870.00

Electronic Filing Menu Corporate Filing Menu

Help MRS 2/9

# **COVER LETTER**

TO;	New Filing Section Division of Corporations
SUBJ	ECT: Chugach Government Services, Inc. (Name of corporation - must include suffix)
Dear S	ir or Madam:
"Certif	closed "Application by Foreign Corporation for Authorization to Transact Business in Florida," licate of Existence," and check are submitted to register the above referenced foreign corporation to it business in Florida.
Please	return all correspondence concerning this matter to the following:
At	tn: Legal Dept
	(Name of Person)
<u>C</u> h	ugach Government Services, Inc.
	(Firm/Company)
<u> 38</u>	00 Centerpoint Dr Ste 601
	(Address)
An	chorage, AK 99503
	(City/State and Zip code)
For fur	ther information concerning this matter, please call:
	(Name of Person) (Area Code & Daytime Telephone Number)
En	rail: erin.manner @ Chugach-ak.com
	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
/	ed is a check for the following amount:  00 Filing Fee \$\simega\$ \$78.75 Filing Fee & S87.50 Filing Fee,  Certificate of Status Certified Copy  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. Chugach Government 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) Alaska (State or country under the law of which it is incorporated) 09/23/2003 (Date of incorporation) Year corp. will cease to exist or "perpetual") September 15, 2008 (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) Attn: Legal Dept. 3800 Centerpoint Dr. Ste 601 Anchorage, AK 99503 (Principal office address) Attn: Legal Dept 3800 Centerpoint Dr Ste 601 Anchorage, AK 99503 (Current mailing address) 8. Administrative Support Services (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) C T Corporation System Name: 1200 South Pine Island Road Office Address: Plantation Florida (City) 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. Ifurther 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 (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: Violet Yeaton	10 FEB -8 PH 12: 52
Address: PO Box 5568 Port Graham, AK 99603	10 m 12: 52
	TALLAHASSEE, FLORIDA
Vice Chairman: none	
Address:	
Director:Roxanne_Akerlund	•
Address: 1110 25th St NE Lake Stevens, WA 98258	· .
Director:	
Address:	
	······································
B. OFFICERS	
President: Robert C. Viramontes	
Address: 3800 Centerpoint Dr Ste 601 Anchorage, A	
Vice President: <u>none</u>	
Address:	
Secretary:Melvin_Sather	
Address: 7032 Whitehall Anchorage, AK 99502	
·	
Address:	****
/	
NOTE: If necessary, you may attach an addendum to the application listing addit	ional officers and/or directors.
13.	
(Signature of Director or Officer listed in number 12 of the	application)
Dahart C Viramontee President	

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

Alaska Entity # 82406D

# 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

### CHUGACH GOVERNMENT SERVICES, INC.

on the 23rd day of September, 2003 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 WHERFOF, I execute this certificate and affix the Great Seal of the State of Alaska on the 14th day of January, 2010.

Amie Notte

Emil Notti Commissioner

Certification Number: 375917-1

Verify this certificate online at https://mysleske.state.ak.us/businees/soskb/verify.asp