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(Re	equestor's Name)			
(Ad	ldress)	<u> </u>		
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(City/State/Zip/Phone #)				
PICK-UP	WAIT	MAIL		
(Bu	isiness Entity Nar	ne)		
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Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
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COVER LETTER

TO:	New Filing Division of								
SUBJ	ECT: Pro	oger	y Syste	ms Cor	pc	ration			
						must include suf	fix		
Dear S	ir or Madam								
"Certif	ficate of Exis	tence,"		te of Good S	tand	ling" and check a		Business in Florida," itted to register the	
Please	return all co	rrespon	dence concer	ning this ma	tter	to the following:			
Mic	helle Ba	attito	ri						
				Name	of P	erson			
Pro	geny Sy	/ster	ns Corp	oration					
				Firm/C	om	pany			
950	<u>0 Inn</u> ov	atior	Drive					_	
	· · · · · ·			Ac	dre	SS	_		
Maı	nassas,	VA:	20110	_					
				City/Stat	e an	d Zip code			
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			E-mail addre	ss: (to be use	ed fo	or future annual re	eport no	titication)	
For fu	rther informa	tion co	ncerning this	matter, pleas	se ca	all:			
Mic	helle Ba	attito	ri	_{at (} 703		、307-980	R		
	Name of P		· -	_ \		ode & Daytime T		ne Number	
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Enclos	New Filing Division of Clifton Bui 2661 Exect Tallahassed	Section Corporal Iding Itive Co E, FL 3	rations enter Circle			New Fil	ing Sect of Corp x 6327	porations	
	0.00 Filing F		3 \$78.75 Fili Certificate	ng Fee &		\$78.75 Filing Fe Certified Copy	e &	□ \$87.50 Filing Fee, Certificate of Status of 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.

(Enter name of co	Systems Corporation orporation; must include "INCORPORATED orp," "Inc," "Co," or "Corp.")	" "COMPANY," "CORPORATION,"			
(If name unavaila	ble in Florida, enter alternate corporate name	adopted for the purpose of transacting busine	ess in Florida)		
_{2.} Virginia	3	54-1766108			
	y under the law of which it is incorporated)	(FEI number, if applicable)		
_{4.} 7/26/199!	5	perpetual			
(Date	of incorporation)	(Duration: Year corp. will cease to exist o	r "perpetual")		
6		in Florida, if prior to registration) 1502, F.S., to determine penalty liability)			
₇ 9500 Inno	vation Drive, Manassas, '	VA 20110	∑		
	(Principal office ad	dress)	PO S		
9500 lu	rovative Drive Man (Current mailing ad	assas, VA 20110	<u> </u>		
-	(Current mailing ad	dress)	M-<		
8. Name and stree	et address of Florida registered agent: (P	.O. Box NOT acceptable)	PM IP: 34 E. FLORID		
Name:	InCorp Services, Inc.		DE F		
Office Address:	17888 67th Court North	: 			
	Loxahatchee	, Florida 33470 (Zip code)			
,	(City)	(Zip code)			
Having been nam designated in this further agree to c	application, I hereby accept the appoin	vice of process for the above stated corp tment as registered agent and agree to d relative to the proper and complete per of my position as registered agent.	act in this capacity. I		
Joseph Joseph	Registered agent's	f I Inloop Serv signature)	ius, Inc		

10 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.

11. Nam	es and business addresses of officers and/or directors:			
	ECTORS			
Chairman	See Officers list below			- · · ·
Address:				
_		=		
Vice Chai	rman:			
Address:				
_				
Director:				
Address:		<u>.</u>		
Director:		<u> </u>		
Address:			_	
		ALL.	ري <u>ت</u>	engil.
B. OFF	ICERS	全 衛 2月	=======================================	STATE OF THE STATE
President:	Walter P. Kitonis, III	RY C	5 2	
Address:	9760 Tico Lane	FST FLO	1 12:	i de la companya de l
	Bristow, VA 20136	RIGE	ئ	
Vice Presi	Michael P. MacKay			
Address:	3860 Dumfries Road			
	Catlett, VA 20119			
Secretary:				
Address:				
Treasurer:	Alexander V. Kot			
	12325 Columbia Springs Way, Bristow, VA 20136			
NOTE: 12.	If necessary, you may attach an addendum to the application listing additional officers	and/or dire	ctors	
The offic are true a a third de	Signature of Director or Officer er or director signing this document (and who is listed in number 12 above) affirms that nd that he or she is aware that false information submitted in a document to the Depart egree felony as provided for in s.817.155, F.S.	t the facts	stated	d herein

Commonwealth of Hirginia



State Corporation Commission

CERTIFICATE OF GOOD STANDING

I Certify the Following from the Records of the Commission:

That PROGENY SYSTEMS CORPORATION is duly incorporated under the law of the Commonwealth of Virginia;

That the date of its incorporation is July 26, 1995;

That the period of its duration is perpetual; and

That the corporation is in existence and in good standing in the Commonwealth of Virginia as of the date set forth below.

Nothing more is hereby certified.



Signed and Sealed at Richmond on this Date: January 9, 2015

Joel H. Peck, Clerk of the Commission

CISECOM
Document Control Number: 1501095726



RECEIVED

15 JAN 15 AN II: 22

FLORIDA DEPARTMENT OF STATE STORY LABOR LABOR Division of Corporations TALLAHASSEE, FLORIDA

December 31, 2014

MICHELLE BATTITORI 9500 INNOVATION DRIVE MANASSAS, VA 20110

SUBJECT: PROGENY SYSTEMS CORPORATION

Ref. Number: W14000076945

We have received your document for PROGENY SYSTEMS CORPORATION and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The certificate of existence must be issued within the last 90 days by the Secretary of State which has custody of the records in the jurisdiction under the laws of which the above listed entity is incorporated/organized.

Please return the corrected original and one copy of your document, along with 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) 245-6052.

Christine Haney Regulatory Specialist II New Filing Section

Letter Number: 214A00027520

- Plean see attached Certificate of Good Standing Gron UA.

-Michelle Bathitis