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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		
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APR 2 8 2015 S. GILBERT

COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: Criterion System	
Name of corpora	ation - must include suffix
. want or output	
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation "Certificate of Existence," or "Certificate of Good above referenced foreign corporation to transact but	
Please return all correspondence concerning this m	natter to the following:
Stew Mast	
Name	e of Person
Criteria	e of Person Kens, Inc Company
Firm/	Company
8330 Boone Bly	odrace
\/ ·	- a
Vicnna, Va	22/82 ate and Zip code
	•
Steve Masta	Sed for future annual report notification)
E-man address: (to be u	sed for future annual report notification)
For further information concerning this matter, ple	ase call:
Steve Hast at (70 Name of Person A	rea 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 & ☐ \$87.50 Filing Fee, Certified Copy 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.

1. Criterian Sustems, Take.

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

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

2. Laware.

(State or country under the law of which it is incorporated)

(State or country under the law of which it is incorporated)

(Date of incorporation)

(Date first transacted business in Florida, if prior to registration)

(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. &330 Boone Blyd Suit to Vienne, VA 22/82"

(Principal office address)

(Current mailing address)

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

Name: Agents and Corporations, Inc.

Office Address: 300 Fyth Are South Suit 101-330

Naples

(City)

(City)

(City)

(City)

(City)

(City)

(Company Manuella State Florida Flo

9. 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.

Agents and Corporations, Inc.

By: John L. Williams, President

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. Names and business addresses of officers and/or directors:
A. DIRECTORS
Chairman: Promod Sharma
Address: 8330 Boone Blvd Suite 400
Vienna, UA 22182
Vice Chairman:
Address:
Director: David H. Coxe
Address: 8330 Boone Blyd Suile 400
Vienna, Va 22182
Director: Steven R. Mast
Address: 8330 Boone Blyd. Suite 400
Vienna, VA 22182
B. OFFICERS
President: Donod Shama
Address: 8330 Boone Blvd. Suite 400
Vienna, VA 2218Z
Vice President:
Address:
Secretary: Steven R. Mast
Address: 8330 Boone Blyd. Suite 400, Vienna VA 2218Z
Treasurer:
Address:
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
12. Ft 1. Inst
Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.
13. Steven P. Mast Secretary (Typed or printed name and capacity of person signing application)
(1 yped or printed name and capacity of person signing application)

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "CRITERION 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 ELEVENTH DAY OF APRIL,

A.D. 2015.

3863276 8300

150407029

Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 2282683

DATE: 04-11-15

You may verify this certificate online at corp.delaware.gov/authver.shtml