

F15000003828

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

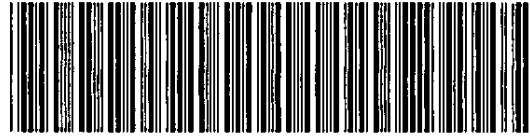
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500276496695

08/28/15--01003--003 **70.00

FILED

2015 AUG 28 AM 11:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Culligan

AUG 31 2015

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SYSTEM HIGH CORPORATION

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:

SABIA CALVO

Name of Person

SYSTEM HIGH CORPORATION

Firm/Company

15059 CONFERENCE CENTER DRIVE, SUITE 200

Address

CHANTILLY, VA 20151

City/State and Zip code

SCALVO@SYSTEMHIGH.COM

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

For further information concerning this matter, please call:

SABIA CALVO

571
at ()

323-6565 EXT 205

Name of Person

Area Code

Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration 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.**

SYSTEM HIGH CORPORATION

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

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

2. VIRGINIA 3. 20-3836817
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 12/08/2005 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)

6. 10/29/2014
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 15059 CONFERENCE CENTER DRIVE, SUITE 200, CHANTILLY, VA 20151
(Principal office address)

(Current mailing address, if different)

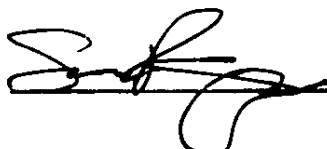
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: INCRP SERVICES, INC.

Office Address: 17888 67TH COURT NORTH
LOXAHATCHEE, Florida 33470
(City) (Zip code)

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.

 Sera Brantigan on behalf of InCorp Services, Inc.
(Registered agent's signature)

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.

FILED
2015 AUG 28 AM 11:07
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: R. KIRK BLUBAUGH

Address: 15059 CONFERENCE CENTER DRIVE, SUITE 200
CHANTILLY, VA 20151

Vice President: _____

Address: _____

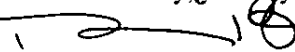
Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

12.  _____

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 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. R KIRK BLUBAUGH, CEO

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

2015 AUG 28 AM 11:07
DEPT. OF STATE
TALLAHASSEE, FLORIDA
FILED

Commonwealth of Virginia



State Corporation Commission

CERTIFICATE OF GOOD STANDING

I Certify the Following from the Records of the Commission:

That SYSTEM HIGH CORPORATION is duly incorporated under the law of the Commonwealth of Virginia;

That the date of its incorporation is December 8, 2005;

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
June 24, 2015

Joel H. Peck

Joel H. Peck, Clerk of the Commission