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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA0000000023
Phone : (850) 205-8842
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: _____

FOREIGN PROFIT/NONPROFIT CORPORATION
Plexus Scientific Corporation

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$70.00

2016 MAY 13 PM 1:53

ALLAHASSEE, FLORIDA

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2016 MAY 13 AM 7:51

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K. SALLY
EXAMINER

MAY 16

**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. **PLEXUS SCIENTIFIC CORPORATION**

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

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

2. **Delaware**

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

3. _____ (FBI number, if applicable)

4. **12/26/1985**

(Date of incorporation)

5. **Perpetual**

(Date of duration, if other than perpetual)

6. _____

(Date first transacted business in Florida; if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine necessity)

7. **5510 Cherokee Avenue, Suite 350, Alexandria, VA 22312**

(Principal office address)

(Current mailing address, if different)

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

Name: **CT Corporation System**

Office Address: **1200 South Pine Island Road**

Plantation, FL 33324

(City)

Florida

(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.

By: _____

CT Corporation System

(Registered agent's signature)

Leslie Martin
Assistant Secretary

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.

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

A. DIRECTORS

Chairman: SEE ATTACHED

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: _____

Address: _____

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. Jacqueline Cain

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.817.135, F.S.

13. Jacqueline Cain Executive VP of OPERATIONS

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

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May 4, 2016

Subject: Annual List of Officers and Directors for the Fiscal Year ending 12/31/2015

Jacquelin Cain – Executive VP of Operations/Director
5510 Cherokee Avenue; Suite 350; Alexandria, VA 22312

David Bell – VP/General Counsel/Secretary/Director
5510 Cherokee Avenue; Suite 350; Alexandria, VA 22312

Michael McCrory – VP/Chief Technology Officer/Director
5510 Cherokee Avenue; Suite 350; Alexandria, VA 22312

George Carellas – VP/Director
5510 Cherokee Avenue; Suite 350; Alexandria, VA 22312

Warren Meekins – Director
5510 Cherokee Avenue; Suite 350; Alexandria, VA 22312

Lamar Edwards – Treasurer
5510 Cherokee Avenue; Suite 350; Alexandria, VA 22312

Delaware

The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PLEXUS SCIENTIFIC CORPORATION" 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 TWELFTH DAY OF MAY, A.D. 2016.

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



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


Jeffrey W. Bullock, Secretary of State

Authentication: 202312220

Date: 05-12-16