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.

(((H16000199291 3)))



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) 617-6383

From:

Account Name : C T CORPORATION SYSTEM Account Number : FCAC00000C23
Phone : (850)205-8842 : (850) 878-5368 Fax Number

\*\*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 CPCS Transcom, Inc.

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

Electronic Filing Menu

Corporate Filing Menu

Help

K. SALY EXAMINER

AUG 15

## **COVER LETTER**

TO: Registration Section Division of Corporations			
SUBJECT: CPCS Transcom Inc.			
Name of	corporation	- must include suffix	
Dear Sir or Madam:			
The enclosed "Application by Foreign Corp "Certificate of Existence," or "Certificate of above referenced foreign corporation to trans	"Good Stand	ling" and check are submitte	isiness in Florida," ed to register the
Please return all correspondence concerning	, this matter	to the following:	
Lisa Rhoades			
	Name of P	erson	
CPCS Transcom Inc.			
	Гілп/Сопр		
1050 Connecticut Avenue NW, Suite 500			
	Addres		
Washington DC 20036			
	Tity/State an	d Zip code	andreit gag a g a a a a antribut for any rese in the above
Irtioades ajepestea			
E-mail address: (	to be used fo	r future annual report notifi	cation)
For further information concerning this matt	er, please ca	H:	
Donald Ludlow	202	772 3350	
Donald Ludlow at Name of Person	Area Code	Daytime Telephone	Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Ft. 32301		MAILING ADDR Registration Section Division of Corpora P.O. Box 6327 Tallahassee, FL 32	n ations
Enclosed is a check for the following amoun	it:		
S70.00 Filing Fee S78.75 Filing F Certificate of S		\$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.

(Enter name of c	corporation: must include "INCORPORATEL Corp." "Inc." "Co," or "Corp.")	D." "COMPANY," "CORPORATIO	ON,"
(If name unavail	able in Florida, enter alternate corporate nam	e adopted for the purpose of transact	ing business in Florida)
Delaware		352493821	
(State or count)	y under the law of which it is incorporated)	(FEI number, if a	pplicable)
September 22, 1	2013 5 r of incorporation)	, N/A	
(Dак	of incorporation)	(Date of duration, if other	er than perpetual)
. <u>N/A</u>			
		in Florida, if prior to registration) 1502, F.S., to determine penalty liab	
1050 Connecticu	t Avenue NW, Suite 500, Washington DC 20	036	701 705
	(Princ	ripal office address)	2018 AUG
e per reference des allers des destactes des alternations des accesses access	(Current mai	ling address, if different)	700 70
. Name and stre	et address of Florida registered agent: (P	O. Box <u>NOT</u> acceptable)	AHII: 05
Name:	CT Corporation System		33.05
Office Address:	1200 South Pine Island Road		
	Plantation, FL 33324	. Florida	
	(City)	(Zip code)	

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.

C. F. Corporation System

By: Mittle Charinand	Assistant Secretary
(Registered at	gent'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.



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

A. DIRECTORS	ALLAHASSEE. FLORIDA
Chairman Aric Mohiuddin  73 Chamberlain Aric Ottowa Ontonio K 18 11/0	· · · · · · · · · · · · · · · · · · ·
Address: 72 Chamberlain Ave. Ottawa Ontario K18 1V9	
Vice Chairman:  Donald Ludlow  Address: 1050 Connecticut Avenue NW, Suite 500	
Address: 1050 Connecticut Avenue NW, Suite 500	
Director: Marc-Andre Roy	
Address: 72 Chamberlain Ave. Ottawa Ontario K18 1V9	
Director:	
Address: 72 Chamberlain Ave. Ottawa Ontario K18 IV9	
3. OFFICERS President: Arit Mohiuddin	
Address: 72 Chamberlain Ave, Ottawa Ontario K1S 1V9	
lanaging Director Donald Ludlow	
ddress: 1050 Connecticut Avenue NW, Suite 500	
Ceretary: Lisa Rhoades	
ddress: 72 Chamberlain Ave. Ottawa Ontario K1S 1V9	
Teasurer:	
address:	
NOTE: If necessary you may anoth an addendum to the application listin	ng additional officers and/or directors.
Signature of Director or Office	r
The officer or director signing this document (and who is listed in number are true and that he or she is aware that false information submitted in a dot third degree felony as provided for in s.817.155, F.S.	11 above) affirms that the facts stated herein
3. Lisa Rhoades, Secretary	
(Typed or printed name and capacity of person sig	ning application)

## Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "CPCS TRANSCOM 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 AUGUST, 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.



5409655 8300 SR# 20165328970



Authentication: 202813397

Date: 08-11-16

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