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COVER LETTER

TO: Registration Section Division of Corporations	
Trident Systems Inc. SUBJECT:	
	on - must include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation f "Certificate of Existence," or "Certificate of Good S above referenced foreign corporation to transact businesses."	tanding" and check are submitted to register the
Please return all correspondence concerning this mat Katie Harvey	ter to the following:
Name a	of Person
Trident Systems Inc.	
Firm/Co 10201 Fairfax Boulevard Suite 300	ompany
Ad	dress
Fairfax, VA 22030	
City/State katie.harvey@tridsys.com	e and Zip code
E-mail address: (to be use	d for future annual report notification)
For further information concerning this matter, pleas	e call:
Katie Harvey 703	359-6238
Name of Person at (Area C	ode 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.

(Enter name of e	corporation; must include "INCORPORATED," 'Corp," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATION,"	
	lable in Florida, enter alternate corporate name add	opted for the purpose of transacting business	in Florida)
Virginia 2.	3.	3. 54-1348077	
(State or count	ry under the law of which it is incorporated)	(FEI number, if applicable)	
10/28/1985	5		
(Dat	e of incorporation) 5	(Date of duration, if other than perpet	ual)
	09/01/20		
·	(Date first transacted business in F	lorida, if prior to registration)	
	(SEE SECTIONS 607.1501 & 607.1502		
10201 Fairfax B	oulevard Suite 300 Fairfax, VA 22030		
*	(Principal	office address)	
			٠,
	(Current mailing	address, if different)	<u> </u>
			= =
			물 을
3. Name and stre	et address of Florida registered agent: (P.O.	Box NOT acceptable) **	OT 21
	eet address of Florida registered agent: (P.O.		0CT 24 /
3. Name and <u>stre</u> Name:	et address of Florida registered agent: (P.O.		OT 24 AM
Name:	^ A		OT 24 AH 9:
Name:	CT Corporation System 1200 South Pine Island Rd		OT 24 AM 9: 45
	CT Corporation System 1200 South Pine Island Rd		(***)

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.

Brian Mueller Assistant Secretary

Bua Mull
(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.

11. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: ____ Address: ___ Vice Chairman: Address: __ Director: __ Address: ___ Director: __ 듕 Address: _ **B. OFFICERS** Nicholas Karangelen President: 10201 Fairfax Boulevard Suite 300 Fairfax, VA 22030 Address: _ John Broglio Vice President: 10201 Fairfax Boulevard Suite 300 Fairfax, VA 22030 Address: Bonnie Edwards Secretary: 10201 Fairfax Boulevard Suite 300 Fairfax, VA 22030 Address: Bonnie Edwards Treasurer: 10201 Fairfax Boulevard Suite 300 Fairfax, VA 22030 Address: NOTE: If necessary, you may attach an add indum to the application listing additional officers and/or directors. 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. **Bonnie Edwards Executive Vice President** (Typed or printed name and capacity of person signing application)

Commonboealth of Hirginia



State Corporation Commission

CERTIFICATE OF GOOD STANDING

I Certify the Following from the Records of the Commission:

That TRIDENT SYSTEMS INCORPORATED is duly incorporated under the law of the Commonwealth of Virginia;

That the date of its incorporation is October 28, 1985;

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: October 11, 2016

Joel H. Peck, Clerk of the Commission

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