# F17000004760

(Requestor's Name)	
(Address)	
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(City/State/Zip/Phone #)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Esomoss Emily Warne)	
(Document Number)	
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### **COVER LETTER**

TO:	_	tration Se on of Cor	ction porations				
eum u			IK CONSULTAN	TS, INC			
SUBJI	LCI:		Namo	of corporation	on - m	ust include suffix	
Dear S	ir or M	adam:					
"Certif	icate of	Existenc		te of Good St	andinį	g" and check are subm	Business in Florida," nitted to register the
	return a DLN QU	•	oondence concer	ning this matt	er to t	he following:	
	"	•••	- · · · · · · · · · · · · · · · · · · ·	Name o	f Pers	on	
THE N	ORTH	POINTE					
				Firm/Co	mpan	y	
3248 W	VHITNE	EY DRIVE					
		-		Add	iress	<u> </u>	<u> </u>
TALLA	AHASSI	EE, FLOR	IDA 32309				
-				City/State	and Z	ip code	
KELIA	S@TEF	KBANK.N					
			E-mail addre	ss: (to be used	d for f	uture annual report no	tification)
For fur	ther inf	formation	concerning this	matter, please	e call:		
LINCO	DLN QU	INTON		850		591-4377	
	Name	e of Perso	n	at ( Area Co	ode	Daytime Telepho	one Number
	Regist Divisi Clifto 2661	tration Se on of Coi n Buildin	porations g : Center Circle	SS:		MAILING AD Registration Sec Division of Cor P.O. Box 6327 Tallahassee, FL	etion porations
Enclose	ed is a	check for	the following ar	nount:			
<b>3</b> \$70	).00 Fili	ing Fee	S78.75 Fili Certificate			8.75 Filing Fee & ertified 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.

	able in Florida, enter alternate corporate na	•	sted for the purpose of transacting business in Florid	da)		
VIRGINIA 2		3 54-	1951541			
2. (State or country under the law of which it is incorporated			(FEI number, if applicable)			
JULY 15, 1999 4.		5				
(Date	of incorporation)	<i>J</i>	(Date of duration, if other than perpetual)			
6.						
	R PARK DRIVE, SUITE Q. HERNDON V		F.S., to determine penalty liability) 0			
7	R PARK DRIVE, SUITE Q. HERNDON V	/A 2017 ncipal o		<del></del> -		
7	R PARK DRIVE, SUITE Q. HERNDON V (Pri PARKWAY, SUITE 13, HERNDON VA	/A 2017 ncipal o 20170	0			
7459 HERNDON	R PARK DRIVE, SUITE Q. HERNDON V (Pri PARKWAY, SUITE 13, HERNDON VA	/A 2017 ncipal o 20170 ailing ac	Office address) Idress, if different)			
459 HERNDON  8. Name and street	R PARK DRIVE, SUITE Q, HERNDON V  (Pri PARKWAY, SUITE 13, HERNDON VA  (Current m  et address of Florida registered agent:	/A 2017 ncipal o 20170 ailing ac	ox NOT acceptable)	<b>)</b> -		
7459 HERNDON  8. Name and stree  Name:	PARK DRIVE, SUITE Q, HERNDON V  (Pri PARKWAY, SUITE 13, HERNDON VA  (Current m  et address of Florida registered agent: LINCOLN QUINTON	/A 2017 ncipal o 20170 ailing ac	ox NOT acceptable)  Florida  32309	17 OCT 21. AM IO: 20		

#### 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.

(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.

II. Nar	nes and business addresses of officers and/or directors:			
A. DIR	ECTORS			
Chairma	n:			
Address:				
Vice Cha	airman:			
			-	
, , , , , , , , , , , , , , , , , , , ,				
Director				
	·			
Address:				
Director:	· <del></del>			
Address:	· <del></del>		<del>7</del> 00	_
		<del>- 5</del>	~ ~ ~	
B. OF	FICERS	経済	<b>1</b>	i)
Presiden	SUDHAKAR GARLANKA t:		AH IO	ر ــــــــــــــــــــــــــــــــــــ
Address:	2830 FOX MILL ROAD	7013( 31.7	20	
	HERNDON VA 20171			
Vice Pre	sident:			
Address:				
Addiess.	<del></del>			•
<b>.</b>	KENNETH ELIAS			
Secretary	4835 CORDELL AVE, APT 824, BETHESDA MD 20814		<u> </u>	
Address:				
Treasure	r:			<del></del> -
Address:		<del></del>		<del></del>
NOTE:	If necessary, you may attach an addendum to the application listing additional officers and	Vor direc	ctors.	
12	Swalados Cardady			
The offi	Signature of Director or Officer icer or director signing this document (and who is listed in number 11 above) affirms that the	ne facts s	tated he	rein
ire true	and that he or she is aware that false information submitted in a document to the Department degree felony as provided for in s.817.155, F.S.			
	DHAKAR GARLANKA, PRESIDENT			
٥	(Typed or printed name and capacity of person signing application)			

# Commontage althor Hirginia



## State Corporation Commission

### CERTIFICATE OF GOOD STANDING

I Certify the Following from the Records of the Commission:

That TEKBANK CONSULTANTS, INCORPORATED is duly incorporated under the law of the Commonwealth of Virginia;

That the date of its incorporation is July 15, 1999;

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 23, 2017

Joel H. Peck, Clerk of the Commission

ECOM

ument Control Number: 1710235559