F18000001303

(Requestor's Name)				
(Address)				
(Address)				
(Addiess)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				





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COVER LETTER

TO: Registration Section Division of Corporations				
Pixspan, Inc.				
SUBJECT: Na	ame of corporatio	n - must include suffix		
Dear Sir or Madam:				
The enclosed "Application by Foreig "Certificate of Existence," or "Certifabove referenced foreign corporation	icate of Good Sta	inding" and check are subn		
Please return all correspondence con Michael J. Rowny	cerning this matte	er to the following:		
	Name o	f Person		
Pixspan, Inc.				
	Firm/Co.	mpany		
6017 Cairn Terrace				
 -	Add	ress		
Bethesda, MD 20817				
	City/State	and Zip code		
michael@pixspan.com				
É-mail ad	dress: (to be used	for future annual report no	otification)	
For further information concerning t	his matter, please	call:		
Michael J. Rowny	202	386-7070		
Name of Person	Area Co	de Daytime Teleph	one Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		Registration Se Division of Cor P.O. Box 6327	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Enclosed is a check for the following	g amount:			
	Filing Fee & cate 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.

Pixspan, Inc.			
(Enter name of co	orporation; must include "INCORPORATED." orp," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATION	,"
(If name unavaila	able in Florida, enter alternate corporate name	adopted for the purpose of transacting	g business in Florida)
Delaware 3		37-1613597	
11/09/2010	y under the law of which it is incorporated)	(FEI number, if app	
(Date	of incorporation) 5.	(Date of duration, if other	than perpetual)
03/01/2018			
506 Windrose Cir	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.15 rcle, Pensacola, FL 32507		ty)
•	(Princip	oal office address)	
	(Current mailir	ng address, if different)	
3. Name and stree	et address of Florida registered agent: (P.C	D. Box <u>NOT</u> acceptable)	18 Hz
Name:	Thomas O. Howie		データ 別 第
Office Address:	506 Windrose Circle		
	Pensacola	32507 , Florida	(1.9) (1.8)
	(City)	(Zip code)	\$ 9

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.

11. Names and business addresses of officers and/or directors: A. DIRECTORS Michael J. Rowny Chairman: 6017 Cairn Terrace, Bethesda, MD 20817 Address: Vice Chairman: Address: The Honorable William C. Eacho, III Director: 6223 Kennedy Drive, Chevy Chase, MD 20815 Address: ____ John W. Holaday, Ph.D. Director: 6502 Hillmead Road, Bethesda, MD 20817 Address: **B. OFFICERS** Michael J. Rowny President: 6017 Cairn Terrace, Bethesda, MD 20817 Address: Address: ____ Secretary: Treasurer: Address: NOTE: If necessary, you may attach an addendum 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.

Michael J. Ronwy, President

Director:

Address:

Asghar D. Mostafa 956 Bellview Road, McLean, VA 22102

Director:

Joaquin Hangen

Address:

19011 Dellabrooke Farm Way, Brookville, MD 20833

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

DELAWARE, DO HEREBY CERTIFY "PIXSPAN, 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 NINTH DAY OF MARCH, A.D. 2018.

e al corn delaware gov/aut

Authentication: 202293558

Date: 03-09-18