F2000003502

(Re	equestor's Name)	
— (Ac	idress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone) #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



900349817139



AUG 13 2020 M. SOLOMON CORPORATION SERVICE COMPANY
1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 378599 / 8074156

AUTHORIZATION : Spelle man

COST LIMIT : \$ 70.00

ORDER DATE : August 6, 2020

ORDER TIME : 10:57 AM

ORDER NO. : 378599-005

CUSTOMER NO: 8074156

FOREIGN FILINGS

NAME: RACKSPACE GOVERNMENT

SOLUTIONS, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Kadesha Roberson -- EXT# 62980

EXAMINER:



August 7, 2020

CSC

RESUBMIT

Please give original submission date as file date.

SUBJECT: RACKSPACE GOVERNMENT SOLUTIONS, INC.

Ref. Number: W20000086267

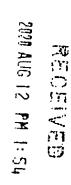
We have received your document for RACKSPACE GOVERNMENT SOLUTIONS, INC. . However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Mel Solomon Senior Section Administrator

Letter Number: 520A00014848



COVER LETTER

IO:	Registration Section Division of Corporations			
SUBJ	ECT: RACKSPACE GOVERNME			
	Name	of corporation	- must include suffix	
Dear S	ir or Madam:			
"Certif	iclosed "Application by Foreign C ficate of Existence," or "Certificat referenced foreign corporation to	te of Good Stand	ling" and check are sub	
Please	return all correspondence concer-	ning this matter	to the following:	
Roniqu	ie Raysor			
		Name of P	erson	
CSC				
		Firm/Comp	bany	
Princet	on South Corporate Ctr., Ste. 160, 10	00 Charles Ewing	Blvd.	
		Addres	SS	
Ewing.	New Jersey 08628			
		City/State an	d Zip code	
ronique	e.raysor@cscglobal.com			
	E-mail addre	ss: (to be used fo	or future annual report i	notification)
For fur	ther information concerning this	matter, please ca	H:	
Roniqu	ne Raysor	800 at (927-9801 x62610	
	Name of Person	Area Code	Daytime Telep	hone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
Please i	ed is a check for the following am make check payable to: FLORIDA I	DEPARTMENT (OF STATE	
□ \$ 70	.00 Filing Fee	_	\$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.

(If name unavaila	able in Florida, enter alternate corporate name	adopted for the purpose of transacting bus	siness in Florida)	
Delaware	y under the law of which it is incorporated)	54-1957476		
(State or country	y under the law of which it is incorporated)	(FEI number, if applica	ible)	
09/14/1999	5.			
(Date	of incorporation) 5.	(Date of duration, if other than	perpetual)	
n/a				
	(SEE SECTIONS 607.1501 & 607.15	n Florida, if prior to registration) 502, F.S., to determine penalty liability)		
1 Fanatical Place,	San Antonio, Texas, 78218			
		ce <u>street</u> address)		
	(Current mailin	g address, if different)	دي. ٠	2020
Name and stree	et address of Florida registered agent: (P.C). Box <u>NOT</u> acceptable)	23 - 75 - 10 - 10 - 10 - 10 - 10 - 10 - 10 - 10	020 AUG -6
Name:	Corporation Service Company		~	
ffice Address:	1201 Hays Street			
mee Address.	Tallahassee	, Florida	te .a/ ₁ /r 	AH 9:43
	(City)	(Zip code)	_	
laving been nam esignated in this orther agree to co	ent's acceptance: ed as registered agent and to accept service application, I hereby accept the appointn omply with the provisions of all statutes re with and accept the obligations of my po	nent as registered agent and agree to	act in this capaci rformance of my	uv.
urther agree to co	omply with\the provisions of all statutes re	elative to the proper and complete pe	rformance of my	

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.

A. DIRECTORS			
□Chairman	Subroto Mukerji Name:	□Chairman	Name: Christopher Rosas
□Vice Chairman	Address:	□Vice Chairman	Address:
Director	San Antonio, TX 78218	■Director	San Antonio, TX 78218
President		□President	
□Vice President		□ Vice President	
☐ Secretary	□Treasurer	■ Secretary	■ Treasurer
□Other	□Other	Other	Other
□ Chairman	Name: Rick Rosenburg	□ Chairman	Name: Stefanie Box
□Vice Chairman	1 Fanatical Place Address:	□Vice Chairman	Address:
□Director	San Antonio, TX 78218	□Director	San Antonio, TX 78218
President		□President	
□Vice President		□Vice President	
Secretary	□Treasurer	□Secretary	□Treasurer - > 20 20
□Other	Other	Other Assistant	Other Other
□Chairman	Name:	□Chairman	Name: 25
□Vice Chairman	Address:	□Vice Chairman	Address:
□Director		□Director	
□President		□President	
□Vice President		□Vice President	
□Secretary	□Treasurer	□Secretary	□Treasurer
□Other	Other	□Other	□Other
Important Notice: I individuals may be	Jse an attachment to report more than six (6). The attact added to the index when filing your Florida Department	chment will be image nt of State Annual Re	d for reporting purposes only. Non-indexed eport form.
12.	Simulation of Discours	Officer	
The officer or direct she is aware that fars.817.155, F.S.	ttor signing this document (and who is listed in number lse information submitted in a document to the Department	11 above) affirms th	nat the facts stated herein are true and that he or
13. <u>Stefanie Box</u>			

Page 1



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

DELAWARE, DO HEREBY CERTIFY "RACKSPACE GOVERNMENT SOLUTIONS, 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 SIXTH DAY OF AUGUST, A.D.

2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "RACKSPACE GOVERNMENT SOLUTIONS, INC." WAS INCORPORATED ON THE FOURTEENTH DAY OF SEPTEMBER, A.D. 1999.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

Authentication: 203417784

Date: 08-06-20