# F21000000726

(Re	equestor's Name)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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### COVER LETTER

	Registration Section Division of Corporation	ıs				
SUBJE	CT: BrimTek, Inc.					
		Name of corporati	on - must inclu	de suffix	<del></del>	
Dear Sir	or Madam:					
"Certific	losed "Application by F tate of Existence," or "C ferenced foreign corpor	Certificate of Good St	anding" and ch	eck are sub	ect Business in Flormitted to registe	orida," r the
Please re	eturn all correspondence	concerning this matt	er to the follow	/ing:		
Ashlyn S	tec					
		Name o	of Person			
Brimtek,	Inc. / Digital Barriers					
		Firm/Co	ompany	· · · · · · · · · · · · · · · · · · ·	<del> </del>	
11911 Fr	eedom Dr Ste 620					
		Add	iress			<del>-</del>
Reston, V	/A 20190					
		City/State	and Zip code		<u></u>	
ashlyn.ste	ec@digitalbarriers.com					<del>7:31</del>
	E-ma	il address: (to be used	for future ann	ual report i	notification)	<u></u>
For furth	er information concerni	ing this matter, please	call:			!
Ashlyn S	tec	at (814	657-4671			
	Name of Person	Area Co	ide Day	time Telep	hone Number	- 2:
						F5.
STREET/COURIER ADDRESS: Registration Section			MAILING ADDRESS: Registration Section			
Division of Corporations		•	Division of Corporations			
	The Centre of Tallahass	1,0,00,000,				
	2415 N. Monroe Street, Fallahassee, FL 32303	Suite 810	Tal	lahassee, F	L 32314	
	is a check for the follo	<b>—</b>				
	ke check payable to: FLC 0 Filing Fee <b>= \$7</b> 8			o Cos e	[] 807 EA PU	r
<b>□ \$/0.</b> 0	-	3.75 Filing Fee & rtificate of Status	☐ \$78.75 Filin Certified Co	_	Sertificate  Certified (	of Status &

#### 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.

BrimTek, Inc.			
	corporation; must include "INCORPORATED," 'Corp," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATION,"	
(If name unavail	able in Florida, enter alternate corporate name ad-	opted for the purpose of transacting bu	usiness in Florida)
2. Virginia	3. 20	3 20-8738067	
	ry under the law of which it is incorporated)	(FEI number, if applic	able)
4. 04/06/2007	5		
(Date	e of incorporation)	(Date of duration, if other than	perpetual)
6.			
o	(Date first transacted business in F	lorida, if prior to registration)	
	(SEE SECTIONS 607.1501 & 607.1502	P., F.S., to determine penalty liability)	
7	Or Ste 620 Reston, VA 20190		
	(Principal office	street address)	
•	(2)	11 15 1500 - 0	<del></del>
	(Current mailing a	address, if different)	~
			· · ·
8. Name and stree	et address of Florida registered agent: (P.O. I	Box NOT acceptable)	٠.'
Name:	InCorp Services, Inc.		<u></u> .
000 411	17888 67th Court North		
Office Address:		_	
	Loxahatchee	, Florida <u>33470</u>	1.37 -
	(City)	(Zip code)	2

#### 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.

A. DIRECTORS			
□ Chairman	Zak Doffman Name:	☐ Chairman	Name:
□Vice Chairman	Address:	□Vice Chairman	Address:
Director	Reston, VA 20190	Director	
□President		□President	
□Vice President		□ Vice President	
☐ Secretary	☐ Treasurer	☐ Secretary	☐ Treasurer
■Other	Other	Other	Other
□Chairman □Vice Chairman □Director	Stuart Purves Name:	□ Vice Chairman	Name:
□President		<b>5</b> 5	
☐ Vice President			
Secretary	□Treasurer	Secretary	☐ Treasurer
■Other CFO	Other	□Other	Other
□Chairman □Vice Chairman	Mark Patrick Name: 11911 Freedom Dr Ste 620 Address:		-41
□Director	Reston, VA 20190	Director	
□President		☐ President	10
■ Vice President		☐ Vice President	
□ Secretary	□Treasurer	Secretary	□Treasurer
□Other	Other	Other	Other
Important Notice: Usindividuals may be	Use an attachment to report more than six (6). To added to the filler when filing your Florida De	partment of State Annual Re	d for reporting purposes only. Non-indexed port form.
-	Signature of Di	rector or Officer	
she is aware that fa s.817.155, F.S. Mark Patrick	tor signing this document (and who is listed in lise information submitted in a document to the	number 11 above) affirms th Department of State constitu	at the facts stated herein are true and that he or tes a third degree felony as provided for in
13. Walk Faulck	) ¥,		

# Commonwealth of Hirginia



## State Corporation Commission

#### CERTIFICATE OF GOOD STANDING

1 Certify the Following from the Records of the Commission:

That Brimtek, Inc. is duly incorporated under the law of the Commonwealth of Virginia;

That the corporation was incorporated on April 6, 2007;

That the corporation's period of 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:

January 11, 2021

Joel H. Keck

Joel H. Peck, Clerk of the Commission

CERTIFICATE NUMBER: 2020031714244630