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### . COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: AOC Key Solutions, Inc				
	rporation - must i	nclude suffix		
Dear Sir or Madam:				
The enclosed "Application by Foreign Corpor "Certificate of Existence," or "Certificate of Cabove referenced foreign corporation to transa	Good Standing" ar	nd check are submit		
Please return all correspondence concerning the	nis matter to the f	ollowing:	77.	
Buthekile Kelley				
	Name of Person	-	22 :	
AOC Key Solutions, Inc				
F	irm/Company		300 0	
14420 Albermarle Point Pl. Suite 200.			<u></u>	
	Address		<del></del>	
Chantilly, VA 20151				
Ci	ty/State and Zip c	ode		
bkelley@ksiadvantage.com				
E-mail address: (to	be used for futur	e annual report noti	fication)	
For further information concerning this matter	r, please call:			
Buthekile Kelley at (	443 538 ) 3884			
	Area Code	Daytime Telephor	ne Number	
Registration Section Division of Corporations The Centre of Tallahassee		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEPAI  \$70.00 Filing Fee \$78.75 Filing Fe Certificate of Sta	RTMENT OF STA c & 🖂 \$78.75		☐ \$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.

	ons, Inc	" "COMPANY" "CORPORATION"	<del></del>		
	orporation; must include "INCORPORATED orp," "Inc." "Co," or "Corp.")	COMPANY, CORPORATION,			
(If name unavaila	ble in Florida, enter alternate corporate name	e adopted for the purpose of transacting busines	ss in Florida)		
DE	3	3 41-2258454			
(State or countr	under the law of which it is incorporated)	(FEI number, if applicable)	(FEI number, if applicable)		
4/15/2021	5		2		
(Date of incorporation)		(Date of duration, if other than perpetual).			
	(Date first transacted business	in Florida, if prior to registration) 1502, F.S., to determine penalty liability)			
14420 Albermarl	Point Pl. Suite 200, Chantilly, VA 20151				
	(Principal of	ffice street address)			
Name and stree	t address of Florida registered agent: (P Corporation Service Company	.O. Box NOT acceptable)			
fice Address:	1201 Hays Street				
	Tallahassee	Florida 32301			
	(City)	, Florida <u>32301</u> (Zip code)			
aving been namesignated in this arther agree to c	application, I hereby accept the appoin		in this capacity		

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

under the law of which it is incorporated.

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

A. DIRECTORS						
□Chairman	Name:	□Chairman	Name: Buthekile Kelley			
□Vice Chairman	Address:	□Vice Chairman	Address:			
□Director	Leesburg VA, 20176	□Director	Farifax, VA 22030			
□President	<del></del>	□President				
□ Vice President		□Vice President				
□Secretary	□Treasurer	☐ Secretary	□Treasurer			
■Other	Other	Other CFO	Other			
□Chairman	Name:	□Chairman	Name:			
□ Vice Chairman	Address:	□Vice Chairman	Address:			
□Director		□Director	N ;			
□President		□President				
□Vice President		□Vice President				
□Secretary	□Treasurer	☐ Secretary	☐ Treasurer			
□Other	Other	Other	Other			
□Chairman	Name:	□ Chairman	Name:			
□Vice Chairman	Address:	□Vice Chairman	Address:			
□Director		□Director				
□President		□President				
□Vice President	-	□Vice President				
□Secretary	Treasurer	□Secretary	□Treasurer			
Other	Other	Other	Other			
	Use an attachment to report more than six (6). The attact added to the index when filing your Florida Departme		port form.			
	$\sigma_{\rm col}$		3/17/20			
12. 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.						
	outhekile kelley	(F()_	317126			
(Typed or printed name and capacity of person signing application)						

# Commonboealth of Hirginia



## State Corporation Commission

#### CERTIFICATE OF GOOD STANDING

1 Certify the Following from the Records of the Commission:

That AOC Key Solutions, Inc., a corporation incorporated under the laws of DELAWARE, is authorized to transact business in the Commonwealth of Virginia;

That the corporation obtained a certificate of authority to transact business in Virginia from the Commission on January 30, 2008; and

That the corporation is 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:

February 19, 2021

Bernard J. Logan, Clerk of the Commission