| (Re | questor's Name) | |
|---------------------------|-------------------|-------------|
| (Ad | dress) | |
| (AdA) | dress) | |
| (Cit | y/State/Zip/Phone | e #) |
| PICK-UP | WAIT | MAIL |
| (Bu | siness Entity Nan | ne) |
| (Do | cument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to I | Filing Officer: | |
| | | |
| | | |
| | | |
| | | |

Office Use Only



700368282867

2021 JUH 18 PH 12: 20

2021 JUN 18 AM 11: 50

1 3 / 2011

35.36

RECEIVED



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088

| Date: | 06/17/2021 | |
|--------------------------|---------------------------------|------------------------|
| Name: | | |
| | #: 1400056 | |
| Entity Nam | e:KR CC | NTRACTING, INC. |
| | cles of Incorporation/Authoriza | |
| — ☐ Ame | endment | |
| Cha | nge of Agent | |
| ☐ Reir | nstatement | |
| ☐ Con | version | |
| ☐ Mer | ger | |
| ☐ Diss | solution/Withdrawal | |
| Ficti | itious Name | |
| ✓ Oth | erCER1 | IFIED COPY UPON FILING |
| Authorized Signature: | To the second | |

F: 800.944.6607

COVER LETTER

| SUBJECT: KR Contracting, Inc. | | |
|---|---|---|
| | | ration - must include suffix |
| Dear Sir or Madam: | | |
| "Certificate of Existen | tion by Foreign Corporationse," or "Certificate of Good gn corporation to transact b | on for Authorization to Transact Business in Florida," d Standing" and check are submitted to register the business in Florida. |
| Please return all corres | pondence concerning this n | natter to the following: |
| | Bruce R | . Kuhlman, Jr. |
| | Nam | ne of Person |
| | KR Con | ntracting, Inc. |
| | Firm/ | /Company |
| | 20300 Seneca Mead | dows Parkway, Suite 200 |
| | A | Address |
| | Germantown, M | Maryland USA 20876 |
| | City/Stz | ate and Zip code |
| | | n@krcont.com |
| | E-mail address: (to be u | sed for future annual report notification) |
| For further information | concerning this matter, plea | ase call: |
| Gary Sm | ith at (26 | 02 \ 924-9356 |
| Name of Person | | Code Daytime Telephone Number |
| | | |
| STREET/COU Registration Sec Division of Corp Clifton Building 2661 Executive Tallahassee, FL | porations Center Circle | MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 |
| nclosed is a check for t | he following amount: | |
| \$70.00 Filing Fee | | \$78.75 Filing Fee & \$87.50 Filing Fee, |
| a to be rung rec | . \$78.75 Filing Fee & Certificate of Status | \$78.75 Filing Fee & \$87.50 Filing Certificate |

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.

| 1 | | R Contracting | | | | |
|---|--|------------------------------|---------------------------------|---|-------------------------|----|
| (Enter name of "Inc.," "Co.," " | corporation; must include "INCORPO Corp," "Inc," "Co," or "Corp.") | ORATED," " | COMPANY," | "CORPORATION," | | |
| (If name unavai | ilable in Florida, enter alternate corpo | rate name ado | pted for the p | urpose of transacting b | business in Florida) | |
| 2. Maryl | land, United States of America | 3 | | 90-0644901 | | |
| (State or count | try under the law of which it is incorp | orated) | | (FEI number, if appli | cable) | |
| 4 | 01/03/2011 | 5 | | | | |
| (Dat | e of incorporation) | 5 | (Date o | of duration, if other tha | an perpetual) | |
| 6. | | | | | | |
| | (Date first transacted (SEE SECTIONS 607.150 | | | | | |
| 7 | 20300 Seneca Meadows Parkway | /, Suite 200, | Germantow | n Maryland USA 208 | 376 | |
| | | (Principal o | office address) |) | | |
| | | Principal Offi | | | 2 | |
| | (Cur | rent mailing a | ddress, if diffe | erent) | 171 | |
| 3. Name and stre | <u>et address</u> of Florida registered ag | ent: (P.O. B | ox <u>NOT</u> ac | ceptable) | 8 227 128 | 7 |
| Name: | COGENCY GLOBAL | INC. | | | | ٠, |
| Office Address: | 115 North Calhoun Stree | et, Suite 4 | _ | | PH 12: 20 | |
| | Tallahassee | | _ , Florida _ | 32301 | 20 | |
| | (City) | | _ , | (Zip code) | | |
| laving been nam esignated in this urther agree to c | ent's acceptance: ned as registered agent and to acc application, I hereby accept the comply with the provisions of all s familiar with and accept the oblig | appointmen statutes relai | t as registere ive to the pr | ed agent and agree i oper and complete p | to act in this capacity | |
| | Jonathan Beenick | ASSISTA | NT SECRET | ARY | | |
| | (Ro | gistered agen | t'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 | |
|----|-----------|--|

| Chairman: | Bruce R. Kuhlman, Jr. |
|---------------------|--|
| Address: | 20300 Seneca Meadows Parkway, Suite 200, Germantown Maryland USA 20876 |
| | |
| Vice Chairman: | ······································ |
| | |
| | |
| | |
| | |
| | |
| Director: | |
| | |
| / tddi e33. | |
| B. OFFICERS | |
| President: | Bruce R. Kuhlman, Jr. (President & CEO) |
| Address: | 20200 Control Mandaus Baduuru Buita 200 Control Mandaud LICA 20070 |
| | |
| | Andrew Webb (CFO) |
| | 10687 Gaskins Way, Suite 200, Manassas Virginia USA 20109 |
| • | |
| Secretary: | |
| | |
| | |
| | |
| NOTE: If necessar | y, you may attach an addendum to the application listing additional officers and/or directors. |
| 2 | LT |
| | Signature of Director or Officer |
| re true and that he | for signing this document (and who is listed in number 11 above) affirms that the facts stated herein or she is aware that false information submitted in a document to the Department of State constitutes y as provided for in s.817.155, F.S. |
| 3 | Bruce R. Kuhlman Jr., President & CEO |
| | (Typed or printed name and capacity of person signing application) |

STATE OF MARYLAND Department of Assessments and Taxation

I, MICHAEL L. HIGGS OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO THE FORFEITURE OR SUSPENSION OF CORPORATIONS, OR THE RIGHTS OF CORPORATIONS TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT KR CONTRACTING, INC. (D13893474), INCORPORATED JANUARY 03, 2011, IS A CORPORATION DULY INCORPORATED AND EXISTING UNDER AND BY VIRTUE OF THE LAWS OF MARYLAND AND THE CORPORATION HAS FILED ALL ANNUAL REPORTS REQUIRED, HAS NO OUTSTANDING LATE FILING PENALTIES ON THOSE REPORTS, AND HAS A RESIDENT AGENT. THEREFORE, THE CORPORATION IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING WITH THIS DEPARTMENT AND DULY AUTHORIZED TO EXERCISE ALL THE POWERS RECITED IN ITS CHARTER OR CERTIFICATE OF INCORPORATION, AND TO TRANSACT BUSINESS IN MARYLAND.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS JUNE 17, 2021.

Michael L. Higgs

Director



301 West Preston Street. Baltimore, Maryland 21201 Telephone Baltimore Metro (410) 767-1340 / Outside Baltimore Metro (888) 246-5941 MRS (Maryland Relay Service) (800) 735-2258 TT/Voice

> Online Certificate Authentication Code: nQb8dy_kAUuBW6gOz8vcw To verify the Authentication Code, visit http://dat.maryland.gov/verify