

F24000001634

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

(Business Entity Name)

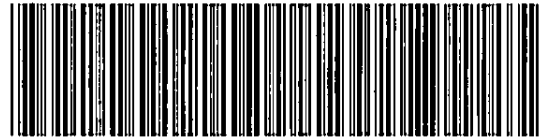
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700425631417

2024 MAR 25 PM 5:21

RECEIVED

REGISTRAR'S OFFICE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

2024 MAR 25 AM 9:11

RECEIVED

MAR 25 2024

K. Brumbley

CT CORP
(850) 656- 4724
3458 lakesore Drive
Tallahassee, FL 32312

Date: 03/25/2024
 Acc#I20160000072

mic DW

Name:	V2X, Inc.
Document #:	
Order #:	15438267

Certified Copy of Arts & Amend:	<input type="checkbox"/>	
Plain Copy:	<input type="checkbox"/>	
Certificate of Good Standing:	<input type="checkbox"/>	
Certified Copy of	<input type="checkbox"/>	
Apostille/Notarial Certification:	<input type="checkbox"/>	Country of Destination:
		Number of Certs:

Filing: <input checked="" type="checkbox"/>	Certified: <input checked="" type="checkbox"/>
	Plain: <input type="checkbox"/>
	COGS: <input type="checkbox"/>

Email Address for Annual Report Notifications:

Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____
Ref# _____

Amount: \$ **78.75**

Thank you!

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: V2X, Inc.
Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Tham Nguyen

Name of Person

V2X, Inc.

Firm/Company

7901 JONES BRANCH DR, Suite 700

Address

McLean, VA 22102

City/State and Zip code

tham.nguyen@gov2x.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tham Nguyen

Name of Person

at (571) 447-6908

Area Code

Daytime Telephone 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

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

\$70.00 Filing Fee

\$78.75 Filing Fee &
Certificate 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.

1. V2X, Inc.
(Enter name of corporation: must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Indiana 3. 38-3924636
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 02/04/2014 5.
(Date of incorporation) (Date of duration, if other than perpetual)

6. Upon Filing
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 7901 JONES BRANCH DR, Suite 700, McLean, VA 22102
(Principal office street address)

(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation FL 33324
(City) (Zip code)

2024 MAR 25 PM 5: 21

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.

SEAN L. EMERICK, ASSISTANT SECRETARY

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

A. DIRECTORS

Chairman Name: See Attached

Vice Chairman Address: _____

Director _____

President _____

Vice President _____

Secretary Treasurer

Other _____ Other _____

Chairman Name: _____

Vice Chairman Address: _____

Director _____

President _____

Vice President _____

Secretary Treasurer

Other _____ Other _____

Chairman Name: _____

Vice Chairman Address: _____

Director _____

President _____

Vice President _____

Secretary Treasurer

Other _____ Other _____

Chairman Name: _____

Vice Chairman Address: _____

Director _____

President _____

Vice President _____

Secretary Treasurer

Other _____ Other _____

Chairman Name: _____

Vice Chairman Address: _____

Director _____

President _____

Vice President _____

Secretary Treasurer

Other _____ Other _____

Chairman Name: _____

Vice Chairman Address: _____

Director _____

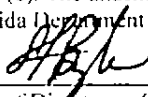
President _____

Vice President _____

Secretary Treasurer

Other _____ Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

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.

13. KEVIN T. BOYLE, SENIOR VICE PRESIDENT
 (Typed or printed name and capacity of person signing application)

Name	Title	Address
Cusumano, Dino M.	Director	7901 Jones Branch Dr, Suite 700, McLean, VA 22102
Elegba, Abbas O.	Director	7901 Jones Branch Dr, Suite 700, McLean, VA 22102
Evangelakos, Lee E.	Director	7901 Jones Branch Dr, Suite 700, McLean, VA 22102
Howell, Mary L.	Chairman of the Board	7901 Jones Branch Dr, Suite 700, McLean, VA 22102
Parker, Melvin	Director	7901 Jones Branch Dr, Suite 700, McLean, VA 22102
Pillmore, Eric M.	Director	7901 Jones Branch Dr, Suite 700, McLean, VA 22102
Prow, Charles L.	Director	7901 Jones Branch Dr, Suite 700, McLean, VA 22102
Snyder, Neil D.	Director	7901 Jones Branch Dr, Suite 700, McLean, VA 22102
Rotroff, Joel M.	Director	7901 Jones Branch Dr, Suite 700, McLean, VA 22102
Waechter, Stephen L.	Director	7901 Jones Branch Dr, Suite 700, McLean, VA 22102
Widman, Phillip C.	Director	7901 Jones Branch Dr, Suite 700, McLean, VA 22102
Bjornson, Josephine F.	Senior Vice President and Chief Human Resources Officer	7901 Jones Branch Dr, Suite 700, McLean, VA 22102
Boyle, Kevin T	Senior Vice President, Chief Legal Officer, General Counsel & Corporate Secretary	7901 Jones Branch Dr, Suite 700, McLean, VA 22102
Chudamani, Chandra	Executive Director, Assistant Controller	7901 Jones Branch Dr, Suite 700, McLean, VA 22102
Elmore, Darren	Assistant Treasurer	7901 Jones Branch Dr, Suite 700, McLean, VA 22102
Frothingham, Cynthia	Vice President, Enterprise Projects	7901 Jones Branch Dr, Suite 700, McLean, VA 22102
Malakar, Sarita B.	Assistant Secretary	7901 Jones Branch Dr, Suite 700, McLean, VA 22102
Minton-Package, Corinne L.	Senior Vice President, Advanced Technology	7901 Jones Branch Dr, Suite 700, McLean, VA 22102
Noon, William B	Corporate Vice President and Chief Accounting Officer	7901 Jones Branch Dr, Suite 700, McLean, VA 22102
Prow, Charles L.	President and Chief Executive Officer	7901 Jones Branch Dr, Suite 700, McLean, VA 22102
Shreves, Kenneth W.	Senior Vice President, Global Mission Training and Sustainment	7901 Jones Branch Dr, Suite 700, McLean, VA 22102
Smith, Michael J	Corporate Vice President, Treasurer, Corporate Development and Investor Relations	7901 Jones Branch Dr, Suite 700, McLean, VA 22102
Tekle, Zekarias	Executive Director, Global Tax	7901 Jones Branch Dr, Suite 700, McLean, VA 22102

State of Indiana
Office of the Secretary of State

CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greeting:

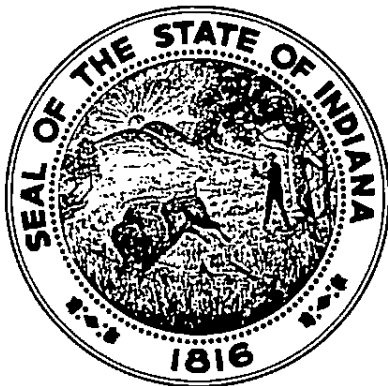
I, DIEGO MORALES, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that records of this office disclose that

V2X, INC.

duly filed the requisite documents to commence business activities under the laws of the State of Indiana on February 04, 2014, and was in existence or authorized to transact business in the State of Indiana on March 14, 2024.

I further certify this Domestic For-Profit Corporation has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution, or expiration has been filed or taken place. All fees, taxes, interest, and penalties owed to Indiana by the domestic or foreign entity and collected by the Secretary of State have been paid.



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, March 14, 2024

Diego Morales

DIEGO MORALES
SECRETARY OF STATE

2014020401158 / 20243668141

All certificates should be validated here: <https://bsd.sos.in.gov/ValidateCertificate>

Expires on April 13, 2024.