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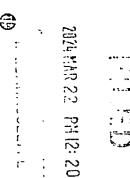
(Requestor's Name)				
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PICK-UP WAIT MAIL				
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COVER LETTER

TO: Registration Section Division of Corporation	18		
SUBJECT: Enterprise Solution	as Inc.		
	Name of corporation	- must include suffix	
Dear Sir or Madam:			
The enclosed "Application by F "Certificate of Existence," or "C above referenced foreign corporate	Certificate of Good Stan	ding" and check are subm	
Please return all correspondence	e concerning this matter	to the following:	
Michael Lee			
	Name of	Person	_
Enterprise Solutions, Inc.			
	Firm/Con	pany	
3110 Fairview Park Dr. Ste 120			
	Addre	288	. <u>.</u>
Falls Church, VA 22042			
	City/State a	nd Zip code	
ttrinchera@enterprisesolutions.net			
E-ma	ul address: (to be used f	or future annual report no	tification)
For further information concern	ing this matter, please o	all:	
Michael Lee	703 at (864-8921	
Name of Person	Area Cod	e Daytime Telepho	one 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	
	ORIDA DEPARTMENT	OF STATE 3 \$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.

utions, Inc.			
	"COMPANY," "CORPORATION,"		
utions Intelligence, Inc.			
able in Florida, enter alternate corporate name ad	opted for the purpose of transacting business in Florida)		
3	54-1785394		
y under the law of which it is incorporated)	(FEI number, if applicable)		
995			
of incorporation)	(Date of duration, if other than perpetual)		
(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1502	lorida, if prior to registration) 2, F.S., to determine penalty liability)		
	street address)		
, ·			
(Current mailing	address, if different)		
_			
et address of Florida registered agent: (P.O. 1	Box NOT acceptable)		
Harsha Vegi	<u> </u>		
1731 Banaghen Dr			
Melbourne	Florida 32940		
(City)	(Zip code)		
ant's assentance.			
ent's acceptance: led as registered agent and to accept service	of process for the above stated corporation at the place		
application, I hereby accept the appointme	nt as registered agent and agree to act in this capacity.		
	ative to the proper and complete performance of my duti ion as registered agent.		
	12:		
V. H.A	20		
(Registered agent's sign			
	y under the law of which it is incorporated) 995 10 of incorporation) (Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1502 (Responsible of the Control of the Contro		

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	Roberto Llames Name:	□Chairman	Name: Michael Lee		
□Vice Chairman	Address:	Address: 2939 Eskridge Rd			
□Director	Fairfax, VA 22031	□Director	Alexandria, VA 22315		
□President	<u></u>	□President			
□Vice President		□Vice President			
□Secretary	□Treasurer	Secretary	□Treasurer		
Other	Other	□Other	□ Other		
□Chairman	Name:	□Chairman	Name:		
	Address:	□Vice Chairman	Address:		
Director		□ Director			
			.		
□President		□President			
		□Vice President			
☐ Secretary	□Treasurer	□Secretary	□Treasurer		
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		
individuals may be	Use an attachment to report more than six (6). The at added to the index when filing your Florida Departr				
12.	Signature of Director	or Officer			
The officer or direct she is aware that fals,817,155, F.S.	ctor signing this document (and who is listed in numbelse information submitted in a document to the Department	per 11 above) affirms th	nat the facts stated herein are true and that he or ites a third degree felony as provided for in		
13 Michael Lee					
(Typed or printed name and capacity of person signing application)					

Commonwealth of Hirginia



State Corporation Commission

CERTIFICATE OF GOOD STANDING

1 Certify the Following from the Records of the Commission:

That ENTERPRISE SOLUTIONS, INCORPORATED is duly incorporated under the law of the Commonwealth of Virginia;

That the corporation was incorporated on December 29, 1995;

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 Scaled at Richmond on this Date:

January 26, 2024

Bernard J. Logan, Clerk of the Commission