

F24 000000 2038

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

(Business Entity Name)

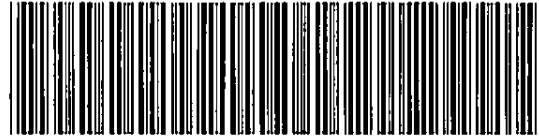
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800427653078

2024 APR 15 PM 1:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

4-15-24

2024 APR 15 PM 3:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED



CSC - Tallahassee
1201 Hays Street
Tallahassee, FL 32301-2607
850-558-1500, Ext:

To: Department Of State, Division Of Corporations
From: Shauna Godbolt
Ext:
Date: 04/15/24
Order #: 1484892-1
Re: Hkt Global (Us) Inc.
Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Application for Certificate of Authority

Amount to be deducted from our State Account: \$70.0 - FL State Account Number:

120000000195

Certificate of Good Standing from State of Incorporation

AUTH

A handwritten signature in black ink, appearing to read 'Shauna Godbolt', is written over the word 'AUTH' and extends to the right.

Please take the following action:

File in your office on basis

Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: HKT Global (US) 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:

Colleen Mullen

Name of Person

HKT Global (US) Inc.

Firm/Company

475 Spring Park Place, Suite 100

Address

Herndon, VA 20170

City/State and Zip code

cmullen@pccwglobal.com

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

For further information concerning this matter, please call:

Colleen Mullen

at (703) 939-2836

Name of Person

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. HKT Global (US) 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. Delaware 3.
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. September 1, 2023 5. Perpetual
(Date of incorporation) (Date of duration, if other than perpetual)

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

7. 475 Spring Park Place, Suite 100 Herndon, VA 20170
(Principal office street address)

(Current mailing address, if different)

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

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida 32301
(City) (Zip code)

9. Registered agent's acceptance:

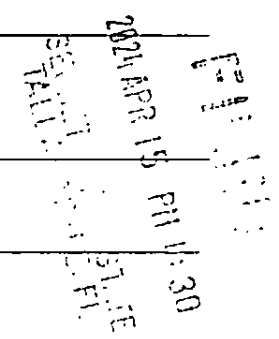
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Corporation Service Company

By: Shauna Godbolt

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: C Marc Halbfinger
 Vice Chairman Address: 475 Spring Park Place
 Director Suite 100
 President Herndon, VA 20170
 Vice President
 Secretary Treasurer
 Other CEO Other

Chairman Name: Bret Scott Rehart
 Vice Chairman Address: 475 Spring Park Place
 Director Suite 100
 President Herndon, VA 20170
 Vice President
 Secretary Treasurer
 Other Other


Chairman Name: Scott Butterworth
 Vice Chairman Address: 475 Spring Park Place
 Director Suite 100
 President Herndon, VA 20170
 Vice President
 Secretary Treasurer
 Other Other

Chairman Name: David Hughes
 Vice Chairman Address: 475 Spring Park Place
 Director Suite 100
 President Herndon, VA 20170
 Vice President
 Secretary Treasurer
 Other Other

Chairman Name: Kondal Mohan Raju
 Vice Chairman Address: 475 Spring Park Place
 Director Suite 100
 President Herndon, VA 20170
 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. Bret Scott Rehart, Director
(Typed or printed name and capacity of person signing application) CSC QUAL-32246

Delaware

Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "HKT GLOBAL (US) INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWELFTH DAY OF APRIL, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "HKT GLOBAL (US) INC." WAS INCORPORATED ON THE FIRST DAY OF SEPTEMBER, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.



7653608 8300

SR# 20241434978

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 203244679

Date: 04-12-24