### 1)006695 Address Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Document #) (Corporation Name) Pick up time Call me Certified Copy Walk in Photocopy Certificate of Status Will wait Mail out AMENDMENTS NEW FILINGS Amendment Profit Resignation of R.A., Officer/Director NonProfit Change of Registered Agent Limited Liability Dissolution/Withdrawal Domestication Merger

OTHER FILINGS Annual Report Fictitious Name Name Reservation

	REGISTRATION/ QUALIFICATION
<b>6</b> /	Foreign
	Limited Partnership
	Reinstatement
	Trademark
<u></u>	Other

88 DEC -8 BMIS: P2

BECEINED

Examiner's Initials

# 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	THE PRESIDIO C	ORPORATION		
(Name of corpora	tion; must include the word tions of like import in lang partnership if not so contain	uage as will clearly in	", "COMPANY", "CORPORATI dicate that it is a corporation instant.)	ON" or ead of a
2. GE (State or country u	ORGIA nder the law of which it is	incorporated) 3	. <u>58-1667655</u> (FEI number, if app	licable)
4. JUNE 23	, 1986	5	PERPETUAL on: Year corp. will cease to exist	
(Date	of incorporation)	(Duratio	on: Year corp. will cease to exist	or "perpetual")
6 DECEM	BER 1998			
(Date first to	ansacted business in Florid	da.) (SEE SECTIONS	607.1501, 607.1502 and 817.15	5, F.S.)
7		5100-J PHII	LADELPHIA WAY	
<i>/</i> ·		T ABTITABLE BEAT	207 AND 20706	SEC ALL
<del> </del>	(Cu	rrent mailing address)	RYLAND 20706	子 经商品
	·			ASSEE ASSEE
	of corporation authorized		try to be carried out in state of Fl	orida)
9. Name and stre	et address of Florida re	egistered agent: (P	P.O. Box or Mail Drop Box No.	OT acceptable)
Name: _			·	
Office Address:	Greenberg Trauri 101 East College Tallahassee, Flo	e Avenue orida 32301	<u> </u>	
-	(850) 222-6891 (850) 681-0207	<del>(phone) — —</del> (fax)	, Florida, (Zip code)	
10. Registered ag	gent's acceptance:			
this application, I h with the provisions	anaba aggent the appointm	ent as registered agei se proper and comple	ocess for the above stated corpor nt and agree to act in this capaci te performance of my duties, and	uy. I juither agree to comply
	(F	Registered agent's sign	nature)	
11. Attached is a ce	rtificate of existence duly	authenticated, not mor	e than 90 days prior to delivery o	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.

A. DIRECTOR	S (Street address only - P.O. Box NOT acceptable)	
Chairman:	KRISTINE CRUIKSHANK	
Address:	1713 WESTMINSTER WAY	
	ANNAPOLIS, MD 21/01	
/ice Chairman:		
Address:		
		<del></del>
Director:		
Address:		
Director:		
		= = 9
		8 DEO
B. OFFICER	S (Street address only - P.O. Box NOT acceptable)	-9 -
	KRISTINE CRUIKSHANK	SEA B I
Address:	1713 WESTMINSTER WAY	For -
	ANNAPOLIS, MD 21401	ATE ST
Vice President:	RUDOLFO CASASOLA	· ¥ · · ·
Address:	1810 RANDOLPH STREET, NW	<u> </u>
	WASHINGTON, DC 20011	
Secretary: &	· · · · · · · · · · · · · · · · · · ·	
reasurer Address:	1713 WESTMINSTER WAY	
radicos	ANNAPOLIS, MD 21401	
<b></b>	RALPH CRUIKSHANK	
hief Operat	ing Officier	
Address:		
	ANNAPOLIS, MD 21401	
NOTE: If nece	essary, you may attach an addendum to the application listing additional officers and/or	r directors.
13.	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the app	olication)
14	KRISTINE CRUIKSHANK, CHAIRMAN	
±7.	(Typed or printed name and capacity of person signing application	)-

#### Secretary of State

Corporations Division Suite 315, West Tower 2 Martin Luther King Jr. Dr. Atlanta, Georgia 30334-1530 DOCKET NUMBER : 983420828
CONTROL NUMBER : 8609813
DATE INC/AUTH/FILED: 06/23/1986
JURISDICTION : GEORGIA
PRINT DATE : 12/08/1998

FORM NUMBER : 211 \$\overline{\text{T}} \sigma\_{\text{S}}\$

SECKETAKY OF STATE

THE PRESIDIO CORPORATION

5100-J PHILADELPHIA WAY
LANHAM, MD 20706

#### CERTIFICATE OF EXISTENCE

I, Lewis A. Massey, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

## THE PRESIDIO CORPORATION A DOMESTIC PROFIT CORPORATION

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the abovenamed entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



Lewis a. Massey

Lewis A. Massey Secretary of State