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- · (Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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T SCHROEDER

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500
ACCOUNT NO. : 12000000195
REFERENCE: 830428 5172953
AUTHORIZATION: Spelle le rade
COST LIMIT : \$ 125.00
ORDER DATE : October 13, 2015
ORDER TIME : 9:15 AM
ORDER NO. : 830428-005
CUSTOMER NO: 5172953
DOMESTIC FILING
NAME: DFI REALTY, LLC
EFFECTIVE DATE:
ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP XX ARTICLES OF ORGANIZATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Courtney Williams - EXT. 62935
EXAMINER'S INITIALS:

COVER LETTER

	tegistration Section Division of Corporations	
	DFI Realty, LLC	
SUBJECT		mited Liability Company
The enclos	sed Articles of Organization and fee(s) a	are submitted for filing.
Please retu	urn all correspondence concerning this m	natter to the following:
	Eva Yee	
		Name of Person
	Kratos Defense & Security Solution	ns, Inc.
		Firm/Company
	4820 Eastgate Mall, Suite 200	
		Address
	San Diego, CA 92121	
		City/State and Zip Code
	eva.yee@kratosdefense.com	to be used for feature assessed assessed to the feature of
	с-mail address: (to be used for future annual report notification)
For further	information concerning this matter, ple	ase call;
Eva Yee	-	358 812-7378)
		Area Code Daytime Telephone Number
Englaced is	a about for the full and a second	
\$125.00 Fi	s a check for the following amount: iling Fee \$\int \frac{\$130.00 \text{ Filing Fee & Certificate of Status}}	\$155.00 Filing Fee & S160.00 Filing Fee, Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations	Street/Courier Address Registration Section Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited	d Liability Company is:		
DFI Realty, LLC			
(N	fust end with the words "Limited L	iability Company, "L.L.C.," or "I	LLC.")
ARTICLE II - Address The mailing address and	s: d street address of the principal offi	ce of the Limited Liability Comp	any is:
Principal Office Addre	ess: <u>Mailing</u>	Address:	
4820 Eastgate Mall, San Diego, CA 9212		4820 Eastgate Mail, Suite 20 San Diego, CA 92121	<u>xo</u>
(The Limited Liability (ered Agent, Registered Office, & Company cannot serve as its own R with an active Florida registration.	egistered Agent. You must design	
The name and the Florid	da street address of the registered a	gent are:	
	Corporation Service Company		
·	Name		
	1201 Hays Street		
•	Florida street address (P.O. Box)	NOT acceptable)	
	Tallahassee	FL 32301	
•	City	Zip	•
the place designated capacity. I further agi	registered agent and to accept served in this certificate, I hereby accept to ree to comply with the provisions of m familiar with and accept the obliging Chapter Corporation Service Company: Registered Agent's Signature	the appointment as registered ages all statutes relating to the proper actions of my position as registered 605, F.S	nt and agree to act in this and complete performance
	(CONTINUE	D)	
	Duran Laff)		

FILED FILED SECRETARY OF STATE INVISION OF CORPORATIONS

Title:	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager		
AMBR	Digital Fusion Solutions, Inc.	
	4820 Eastgate Mall, Suite 200	
	San Diego, CA 92121	
(Use attachment if necessary)		
ective date is listed, the date must be speci of filing.)	f filing: (OPTIONAL) ific and cannot be more than five business days prior to or 90 d	ays after
ective date is listed, the date must be speci of filing.) E VI: Other provisions, if any.	filling: (OPTIONAL) ific and cannot be more than five business days prior to or 90 d	ays after
ective date is listed, the date must be speci of filing.) E VI: Other provisions, if any.	ific and cannot be more than five business days prior to or 90 d	ays after
REQUIRED SIGNATURE: Signature of a memi (In accordance with section 60 constitutes an affirmation und I am aware that any (alse infor	ific and cannot be more than five business days prior to or 90 d	ays after
REQUIRED SIGNATURE: Signature of a memi (In accordance with section 60 constitutes an affirmation und I am aware that any false inforcenstitutes a third degree felor	ber or an authorized representative of a member. 5.0203 (1) (b), Florida Statutes, the execution of this document er the penalties of perjury that the facts stated herein are true. rmation submitted in a document to the Department of State ny as provided for in s.817.155, F.S.)	
REQUIRED SIGNATURE: Signature of a memi (In accordance with section 60 constitutes an affirmation und I am aware that any false inforcenstitutes a third degree felor	ber or an authorized representative of a member. 5.0203 (1) (b), Florida Statutes, the execution of this document er the penalties of perjury that the facts stated herein are true. rmation submitted in a document to the Department of State ny as provided for in s.817.155, F.S.) GL. M. FLANK Typed or printed name of signee (15 A ASSISTANT SECRETORY OF Digital Fusion	
Signature of a memical aware that any false information constitutes a third degree felor	ber or an authorized representative of a member. 5.0203 (1) (b), Florida Statutes, the execution of this document er the penalties of perjury that the facts stated herein are true. rmation submitted in a document to the Department of State my as provided for in s.817.155, F.S.) Filing Fees:	
Signature of a memical formation and lam aware that any false inforcementations at third degree felor. \$125.00 Filing Fee for Articles of Organ	ber or an authorized representative of a member. 5.0203 (1) (b), Florida Statutes, the execution of this document er the penalties of perjury that the facts stated herein are true. rmation submitted in a document to the Department of State ny as provided for in s.817.155, F.S.) GL. M. FLANK Typed or printed name of signee (15 A ASSISTANT SECRETORY OF Digital Fusion	
Signature of a memical aware that any false information constitutes a third degree felor	ber or an authorized representative of a member. 5.0203 (1) (b), Florida Statutes, the execution of this document enter the penalties of perjury that the facts stated herein are true. I remain submitted in a document to the Department of State my as provided for in s.817.155, F.S.) Figure Filing Fees: nization and Designation of Registered Agent	

FILED STAIL OF CORPORATIONS