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Certified Copies Certificates of Status
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B. KOHR

AUG 14 2009

EXAMINER



ACCOUNT NO. : 12000000195 REFERENCE : AUTHORIZATION : COST LIMIT : ORDER DATE: August 13, 2009 ORDER TIME : 2:05 PM ORDER NO. : 095542-005 CUSTOMER NO: 4331120 FOREIGN FILINGS NAME: CAPGEMINI GOVERNMENT SOLUTIONS LLC XXXX QUALIFICATION (TYPE: LL) PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

EXAMINER:

CONTACT PERSON: Heather Chapman -- EXT# 2908

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: Capgemini Government Solutions LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.") Delaware (Jurisdiction under the law of which foreign limited liability company is organized) 4 October 25, 2002 PERPETUAL (Date of Organization) (Duration: Year limited liability company will cease to (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) _{7.} 623 Fifth Avenue, 33rd Floor, New York, NY 10022 (Street Address of Principal Office) 8. If limited liability company is a manager-managed company, check here 9. The name and usual business addresses of the managing members or managers are as follows: Cappemini U.S. LLC (Sole member)

10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: Information Technology

and Management Consulting and Outsourcing

Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Eve B. Bolkin Assistant Secretary Caryenini U.S. LLC, sole member
Typed or printed name of signee

Exhibit A List of Managers of Capgemini Government Solutions LLC

<u>Name</u>	Address
Lanny Cohen	623 Fifth Avenue, 33 rd Floor, New York, NY 10022
David Northington	623 Fifth Avenue, 33 rd Floor, New York, NY 10022
David Bonner	Energy Plaza, 1601 Bryan Street, 23 rd Floor, Dallas, TX 75201
Renny DiPentima	c/o 2250 Corporate Park Drive, Suite 410, Herndon, VA 20171
Greg Newbold	2000 Pennsylvania Ave., NW, Suite 5100, Washington, DC 20006
Bill Winkenwerder	330 John Carlyle Street, Suite 220, Alexandria, VA 22314
Christopher Giustí	2250 Corporate Park Drive, Suite 410, Herndon, VA 20171

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

ent Solutions Ll	LC		
alternate name to	be used in the	e state of Florida is:	
orida street address	of the registe	ered agent and office are:	
ration Service C	ompany		
	(Name)		
Hays Street			
Florida Street Ad	dress (P.O. Box	NOT ACCEPTABLE)	
assee	FL	32301	
	City/State	/Zip	
olace designated in 1 this capacity. I fur d complete perform n as registered ager	this certificate ther agree to ance of my du at as provided Heath	e, I hereby accept the appoint comply with the provisions at ties, and I am familiar with I for in Chapter 608, Floridater Chapman	ntment as registered of all statutes and accept the
	e alternate name to orida street address ration Service C Hays Street Florida Street Addressee egistered agent and olace designated in a this capacity. I furily decomplete perform.	e alternate name to be used in the corida street address of the registeration Service Company (Name) Hays Street Florida Street Address (P.O. Box City/State) egistered agent and to accept service designated in this certificate at this capacity. I further agree to a complete performance of my due in as registered agent as provided a company (Name) Heath	e alternate name to be used in the state of Florida is: orida street address of the registered agent and office are: ration Service Company (Name) Hays Street Florida Street Address (P.O. Box NOT ACCEPTABLE) assee FL City/State/Zip egistered agent and to accept service of process for the above place designated in this certificate, I hereby accept the appoint this capacity. I further agree to comply with the provisions of complete performance of my duties, and I am familiar with as registered agent as provided for in Chapter 608, Florida

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "CAPGEMINI GOVERNMENT SOLUTIONS LLC"

IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN

GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF

THIS OFFICE SHOW, AS OF THE THIRTEENTH DAY OF AUGUST, A.D. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CAPGEMINI GOVERNMENT SOLUTIONS LLC" WAS FORMED ON THE TWENTY-FIFTH DAY OF OCTOBER, A.D. 2002.

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

3584244 8300

090775970

Jeffrey W. Bullock, Secretary of Stal AUTHENTY CATION: 7473726

DATE: 08-13-09

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