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DIVISION OF CORPORATION

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T. HAMPTON

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EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations			
SUBJEC		ad Support Group LLC ame of Limited Liability Company		
			ransact Business in Florida," Certificate of ity company to transact business in Florida	
Please re	eturn all correspondence concerning this r	natter to the following:		
		Debbie Mathis		
Name of Person				
Bowhead Holding Company				
Firm/Company				
1011 SW Klickitat Way #104				
Address				
Seattle, WA 98134				
City/State and Zip Code				
accounting@bowhead.com				
	E-mail address:	(to be used for future annual report no	tification)	
For furth	ner information concerning this matter, ple	ease call:		
	Debbie Mathis	at (206)	957-5246	
Name of Person Area Code & Daytime Telephone Number		ne Number		
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		
Enclose	ed is a check for the following amo	ount:		
[\$125.00 Filing Fee \$130.00 Filing Fee Certificate		\$160.00 Filing Fee, Certificate of Status & Certified Copy	

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:

1.	Bowhead Support Group LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC"	.")	
	n/a	• ,	
COL	name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copnisent of the managers or managing members adopting the alternate name. The alternate name must include "Limite impany," "L.L.C," "LLC.")		
2.	Alaska 3. 20-3737242		
(Alaska 3. 20-3737242 (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)		_
4.	11/4/2005 _{5.} Perpetual		
	(Date of Organization) (Date of Organization) 5. Perpetual (Duration: Year limited liability company will c exist or "perpetual")	ease to	•
6.	To be determined		
	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)		_
7.	1011 SW Klickitat Way #104		<u>ت</u> .
	Seattle, WA 98134	090	SECI
	(Street Address of Principal Office)	<u>8</u>	
8.	If limited liability company is a manager-managed company, check here	29	F CC
9.	The name and usual business addresses of the managing members or managers are as follows:	AM IO	OF STI
	Bowhead Holding Company (sole member)	20	_ 플류
	1011 SW Klickitat Way #104		- SS
	Seattle, WA 98134		
the	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custo e jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language inslation of the certificate under oath of the translator must be submitted.)		
11	. Nature of business or purposes to be conducted or promoted in Florida:		_
	Support services for State and Federal agencies		_ •
	lu louli-		
	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.)		
	Lee Hogden		
	Typed or printed name of signee		

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.

1. The name of the Limited Liability Company is:	
Bowhead Support Group LLC	
If unavailable, the alternate to be used in the state of Florida is:	
n/a	
2. The name and the Florida street address of the registered agent and office are:	
C T Corporation System (Name)	
1200 South Pine Island Road Florida Street Address (P.O. Box NOT ACCEPTABLE)	
Plantation FL 33324 City/State/Zip	
Having been named as registered agent and to accept service of process for the above staliability company at the place designated in this certificate, I hereby accept the appointment agent and agree to act in this capacity. I further agree to comply with the provisions of a relating to the proper and complete performance of my duties, and I am familiar with and obligations of my position as registered agent as provided for in Chapter 608, Florida Statem (Signature)	ent as registered ll statutes l accept the
\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional)	SECRETARY OF COLOR

Alaska Entity # 96978

State of Alaska Department of Commerce, Community, and Economic Development

CERTIFICATE OF GOOD STANDING

THE UNDERSIGNED, as Commissioner of Commerce, Community, and Economic Development of the State of Alaska, and custodian of corporation records for said state, hereby certifies that

BOWHEAD SUPPORT GROUP LLC

on the 4th day of November, 2005 filed in this office its Articles of Organization for a Limited Liability Company organized under the laws of this state.

I FURTHER CERTIFY that said Limited Liability Company is in good standing, having fully complied with all the requirements of this office.

No information is available in this office on the financial condition, business activity or practices of this corporation.



IN TESTIMONY WHEREOF, I execute this certificate and affix the Great Seal of the State of Alaska on the 25th day of September, 2009.

Amis notti

Emil Notti Commissioner

Certification Number: 350394-1

Verify this certificate online at https://myalaska.state.ak.us/business/soskb/verify.asp