Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

: C T CORPORATION SYSTEM Account Name

Account Number : FCA000000023 Phone

: (850)222-1092

Fax Number

: (850)878-5368

Enter the email address for this business entity to be used for facure annual report mailings. Enter only one email address please.

Exail	Address:	

FLORIDA/FOREIGN LIMITED LIABILITY CO.

ANC Research & Development, LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$125.00

J. BRYAN

FEB -5 2009

EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporation	15								
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Please	return all correspondence	concerning this ma	tter to th	te following						
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		E-mail address: (t	о ре пес	d for future	nnual report r	notifica	tion)			
For fur	ther information concerni	ng this matter, pleas	se call:							
	Michele	Christiansen		at (9	07 ₎		263-5525			
	Name	of Person	Are	a Code & D	aytime Teleph	ane Nu	mber			
	MAILING ADDRESS Division of Corporation		Divisio	ET ADDRE	ations					
	Registration Section P.O. Box 6327		Regist	ration Section Building	n					
	Tallahassee, PL 32314	••	2661 E	executive Ce assec, FL 32						
Enclos	sed is a check for the	following amou	n t :							
	\$125.00 Filing Fee	\$130.00 Filing Certificate of		\$155.	00 Filing Fee & Certified Cop		\$160.00 Filing Fo of Status & C			

100

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

IN LI	I COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN MITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1.	ANC Research & Development, LLC
	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
CD	name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written assent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability ampany," "L.L.C." "LLC."
2,	State of Alaska 3.
	(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
4.	1/13/2005 5. Perpetual
	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
б,	(Date Grand hardened baselines to Clarks Marieure and Charles to Clarks to Clarks and Charles to Clarks and Charles to Clarks to Clarks and Charles to Cha
	(Date first transacted business in Florida, if prior to registration.) (See sections 608,501 & 608,502 F.S. to determine penalty liability)
7.	360 Command View Room, E1332, Colorado Springs, Colorado 80915-9719 (Street Address of Principal Office)
	SAN +
	(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:
	CIRI Development Corporation, Sole Member, 2525 C St., Ste 500, Anchorage, AK 99503
the	Attached is an original certificate of existence, no more than 90 days old, duty authenticated by the official having custody of records in Equivalence under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a ustation of the certificate under each of the translator must be submitted.)
11	. Nature of business or purposes to be conducted or promoted in Florida: Tactical Data Terminal
	Space support .
	A Grane Christiansur
	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.)
	Michele Christiansen, Authorized Representative
	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.

	ANC Research	a & Development, LLC					
If unavailable, the alterna	ate to be used in the s	state of Florida is;					
2. The name and the Florida street address of the registered agent and office are:							
C T Corporation System							
		(Name)	SA TO	+			
	1200 Su	uth Pine Island Road	:" <u>Q</u>	3	m		
	STATE STATE	Ü	O				
	Plantation	FL ³³³²⁴	Örri 30	9			
-		City/State/Zip					

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this cupacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

By: (Signature)

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

· Alaska Entity # 91588

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

ANC RESEARCH & DEVELOPMENT, LLC

on the 13th day of January, 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 4th day of February, 2010.

Amis notte

Emil Notti Commissioner

Certification Number: 386754-1 Verify this certificate online at https://myalasks.state.ak.us/business/soskb/verify.asp