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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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TO ACKNOWLEDGE SUFFICIENCY OF FILLING

BENEVALUE OF STATE OF

B. KOHR
FEB 2 1 2011
EXAMINER

DIVISION OF CORPORATIONS

11 FEB 10 AM 8: 38



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 10, 2011

DOREEN WALLACE CSC TALLAHASSEE, FL

SUBJECT: XENON, LLC Ref. Number: W11000008220 RESUBMIT

Please give original submission date as file date.

We have received your document for XENON, LLC and the authorization to debit your account in the amount of \$125.00. However, the document has not been filed and is being returned for the following:

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a foreign limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations. Therefore, the limited liability company must select an alternate name for use in the state of Florida. Also, please note that adding "of Florida" or "Florida" to the end of the name is not acceptable.

Please insert the alternate name in the space provided on the application form. You must also attach a copy of the written consent ofthe managers or managing members adopting the alternate name for Florida. For your convenience, we are enclosing a fill-in-the-blank form for you to complete and return to our office for processing.

The alternate name must end with the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The word "Limited"may be abbreviated as "Ltd." and the word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable limited liability company suffixes in Florida: "Limited Company," "L.C.," and "LC."

The existing entity with the similar name is XENON INC. -- Document Number P1000054568.

ALSO, please list the STREET ADDRESS of the company's principal office in Item 7. You may also list a MAILING ADDRESS if the company has a separate mailing address.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Buck Kohr Regulatory Specialist II

Letter Number: 211A00003580

www.sunbiz.org

Division of Corporations D.O. ROY 6227 Tallahassas Florida 2221



ACCOUNT NO. : I2000000195

REFERENCE: 668333 7817600

AUTHORIZATION (2)

COST LIMIT : "\$"

ORDER DATE: February 8, 2011

ORDER TIME : 9:30 AM

ORDER NO. : 668333-001

CUSTOMER NO: 7817600

FOREIGN FILINGS

NAME: XENON, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX_____ PLAIN STAMPED COPY

CONTACT PERSON: Doreen Wallace -- EXT# 2928

EXAMINER:

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

TRANSACT BUSINESS IN FLORIDA
IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A BORE LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: 1. XENON, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
XENONUSA LLC
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the wri
consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.")
2. Delaware
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
4. 01/10/1996 5. Perpetual
(Date of Organization) (Duration: Year limited liability company will cease to
exist or "perpetual")
6
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 4055 North 40th Street, Arlington, VA 22207
(Street Address of Principal Office)
8. If limited liability company is a manager-managed company, check here
O. The name and usual hypiness addresses of the same along the same at the sam
9. The name and usual business addresses of the managing members or managers are as follows:
Elizabeth Gondles
P. O. Box 7333
Arlington, Virginia 22207
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of record 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:
CONSULTING FIRM, CRIMINAL JUSTICE, HEALTHCARE, PUBLIC HEALTH, BUSINESS
Elizabeth Gendles Signature of a member 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. I am aware that any false information submitted in a
document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.) Elizabeth Gondles
Typed or printed name of signee

WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE STATE OF FLORIDA

We, the undersigned, do hereby certify that we are the Managers and/or Managing
Members of XENON, LLC
(Name of Limited Liability Company)
a limited liability company duly organized and existing under the laws of
DELAWARE
(State or Country of Organization)
Because the name of this foreign limited liability company does not satisfy the
requirements of the s. 608.406, F.S., the limited liability company hereby adopts the
following name to transact business in the state of Florida:
XENONUSA LLC
(Name to be used by limited liability company in Florida. NOTE: Name must end with Limited Liability Company, L.L.C., or LLC.)
Date: 02/11/11
Signature(s) of Manager(s) and/or Managing Member(s):
Elizabeth Jondles
Congress of the Congress of th

CR2E122 (7/07)

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	he Limited Liability Company is:	
XENON, LLC		
If unavailable, the	e alternate to be used in the state of Florida is:	
2. The name and	the Florida street address of the registered agent and office are:	
C	Corporation Service Company	
	(Name)	
12	201 Hays Street	
_	Florida Street Address (P.O. Box NOT ACCEPTABLE)	
Т	Tallahassee _{FL} 32301	
_	City/State/Zip	
liability company of agent and agree to relating to the pro- obligations of my p	ed as registered agent and to accept service of process for the above stated at the place designated in this certificate, I hereby accept the appointment of act in this capacity. I further agree to comply with the provisions of all states of an accept and complete performance of my duties, and I am familiar with and acceptation as registered agent as provided for in Chapter 608, Florida Statute orporation Service Company y: (Signature)	as registered atutes cept the

\$ 100.00 Filing Fee for Application

\$ 25.00 \$ 30.00

\$ 5.00

Designation of Registered Agent

Certificate of Status (optional)

Certified Copy (optional)

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "XENON 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 TENTH DAY OF FEBRUARY, A.D. 2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "XENON LLC"
WAS FORMED ON THE TENTH DAY OF JANUARY, A.D. 1996.

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

2579280 8300

110138978

DATE: 02-10-11

AUTHENTYCATION: 8551838

Jeffrey W. Bullock, Secretary of State

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