# M1100001496

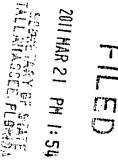
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
. PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
3946
Special Instructions to Filing Officer:  A. LUNT  MAR 2 3 2010
MAR 2 3 2010
EXAMINER

Office Use Only



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March 7, 2011

CLAUDINE BERON 378 NORTHLAKE BLVD. #258 NORTH PALM BEACH, FL 33408

SUBJECT: INITIATE GOVERNMENT SOLUTIONS, LLC

Ref. Number: W11000012946

We have received your document for INITIATE GOVERNMENT SOLUTIONS, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

The registered agent must sign accepting the designation.

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) 245-6094.

Agnes Lunt Regulatory Specialist II

Letter Number: 411A00005546

#### **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Initiate Government Solutions, LLC
Name of Limited Liability Company
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida
Please return all correspondence concerning this matter to the following:
Claudine Beron
Name of Person
. Initiate Government Solutions
Firm/Company
378 Northlake Blvd #258
Address
North Palm Beach, FL 33408
City/State and Zip Code
claudine.beron@initiatesolutions.com  E-mail address: (to be used for future annual report notification)
•
For further information concerning this matter, please call:
Claudine Beron at (703 ) 599-1203
Name of Person Area Code & Daytime Telephone Number
MAILING ADDRESS: STREET ADDRESS: Division of Corporations Division of Corporations
Registration Section Registration Section P.O. Box 6327 Clifton Building
Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount:  \$\int_{\$125.00}\$ \text{Filing Fee} \int_{\$130.00}\$ \text{Filing Fee & Certificate of Status}  \$\int_{\$155.00}\$ \text{Filing Fee & Certificate Copy}  \$\int_{\$160.00}\$ \text{Filing Fee, Certificate of Status}

### 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 RUSINESS IN THE STATE OF FLORIDA:

Initiate 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 3. 43983-29
(Jurisdiction under the law of which foreign limited liability company is organized)  (FEI number, if applicable)
July 30, 2007 5. perpetual
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
<sub>5.</sub> 1/1/2010
(Date first transacted business in Florida, if prior to registration.) (See sections 608 501 & 608 502 F.S. to determine penalty liability)
No principal offices 378 Normalus Blud #256
North rain blach the 33400 62 N
(Street Address of Principal Office)
3. If limited liability company is a manager-managed company, check here
The name and usual business addresses of the managing members or managers are as follows:
Carl C. Schott 916 I Ave, Coronado CA 92118
Claudine Beron 378 Northlake Bvld #258, North Palm Beach FL 33408
Christine Schott 916 I Ave, Coronado CA 92118
<ol> <li>Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in ne jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a ranslation of the certificate under oath of the translator must be submitted.)</li> </ol>
1. Nature of business or purposes to be conducted or promoted in Florida: provide healthcare
consulting to state and federal entities across the nation.
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. 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.)

Typed or printed name of signee

Claudine Beron

## 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:		
Initiate Government Solutions, LLC		
If unavailable, the alternate to be used in the state of Florida is:		
Initiate Government Solutions, L.L.C.		
2. The name and the Florida street address of the registered agent and office are:	2011 MAR	
Claudine Beron	*** ** · ·	-
(Name)		1
378 Northlake Blvd #258	- 11 cm	
Florida Street Address (P.O. Box NOT ACCEPTABLE)	- 54	
North Palm Beach FL 33408		
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 capacity. 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.

(Signature)

\$ 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 "INITIATE 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 FIRST DAY OF MARCH, A.D. 2011.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID LIMITED
LIABILITY COMPANY IS DULY FORMED UNDER THE LAWS OF THE STATE OF
DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT
HAVING BEEN CANCELLED OR DISSOLVED SO FAR AS THE RECORDS OF THIS
OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "INITIATE GOVERNMENT SOLUTIONS, LLC" WAS FORMED ON THE THIRTIETH DAY OF JULY, A.D. 2007.

4398329 8300

110244823

Jeffrey W. Bullock, Secretary of State

AUTHENTY CATION: 8592263

DATE: 03-01-11

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