Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

L. SELLERS

From:

Account Name : C T CORPORATION SYSEMXAMINER

Phone

: (850)222-1092

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

Email Address:

Foreign Limited Liability Company Celcite Management Solutions, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$763.75



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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA SIXILUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIMITED LIMITATE OF FLORIDA.

1. Celcite Management Solutions, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	
(If name unavailable, anter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the writ consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.")	ter
2. Delaware 3. 562381391 (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)	
4. 07/31/2003 (Date of Organization) 5. Perpetual (Duration: Year limited liability company will cease to exist or "perpenual")	
6. 07/01/2010 (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	
7. 13800 Coppermine Rd., Herndon, VA 20171	
(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: Rahul Sharma, Member, 13800 Coppermine Road, Hemdon, VA 20171	
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records 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 cath of the translation must be submitted.)	in
11. Nature of business or purposes to be conducted or promoted in Plorida:	
Telecommunications consulting	
allo mis	
Signature of a member or an authorized representative of a member.	
(In accordance with section 508.408(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.)	
Rahul Sharma	Ť
Typed or printed name of signee	Š

FLOST - 10/05/2010 C T Filing Manager Online

EP 28 AM 9: 02

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.

Celcite Manage	ement Solutions, LLC
If unavailable	e, the 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 T Corporation System
	(Name)
	1200 South Pine Island Road
	Florida Street Address (P.O. Box NOT ACCEPTABLE)
. ' '	en e
•	Plantation FL 33324
	City/State/Zip
Having been r	named as registered agent and to accept service of process for the above stated limited
liubility compo	any at the place designated in this certificate, I hereby accept the appointment as registe
agent and agr	ee to act in this capacity. I further agree to comply with the provisions of all statutes proper and complete performance of my duties, and I am familiar with and accept the
retaung to une ahligations of	my position as registered agent as provided for in Chapter 608, Florida Statutes.
201,641131111 0]	C T Corporation System
	Shireman I was
	Vice President
	(Signature) and Assistant Secretary
÷	\$ 100.00 Filing Fee for Application
	S 25.00 Designation of Registered Agent
	\$ 30.00 Certified Copy (optional)
	C # 00 Contifeets of Status (antique)

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CELCITE MANAGEMENT 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 TWENTY-SIXTH DAY OF SEPTEMBER, A.D. 2011.

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

3537410 8300

111040080

y verify this certificate online

AUTHENTY CATION: 9052312

11111 1111 3052512

DATE: 09-26-11