# M12000004348

(Re	equestor's Name)			
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B. BOSTICK AUG - 2 2012

EXAMINER

#### **COVER LETTER**

TO:

Existence, and che	plication by Foreign Limited Liabi	ne of Limited Liability Company		
Existence, and che				
	eck are submitted to register the ab	ility Company for Authorization to Transact Business in Florid pove referenced foreign limited liability company to transact bu		
Please return all c	orrespondence concerning this ma	tter to the following:		
t e	Catherine Lilly			
<del>-</del>		Name of Person		
	ASRC Federal Holding Com	pany, LLC		
_		Firm/Company	-	
ŧ	6303 Ivy Lane, Suite 130			
<del>-</del>		Address	_	
1	Greenbelt, Maryland 20770			
<del>-</del>		City/State and Zip Code	_	
1	catherine.lilly@asrcfederal.co	om 📆		
_	E-mail address: (to	o be used for future annual report notification)	<b>7</b>	
For further inform	nation concerning this matter, pleas	se call:	AUG.	77
Catherin	ne Lilly	at (301 ) 8373885		(Campings
-	Name of Person	Area Code & Daytime Telephone Number		
Division	IG ADDRESS: of Corporations	STREET ADDRESS: Division of Corporations	PH 12: 51	. •
Registrat P.O. Box	ion Section	Registration Section Clifton Building		
	see, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301		

### 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:

IMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
Mission 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 writter consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.")
Nevada 3, 27-0473810
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
. 06/26/2009 5. Perpetual
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
<sub>5.</sub> 01/01/2011
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
6303 Ivy Lane, Ste. 130 Greenbelt, MD 20770
(Street Address of Principal Office)
(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:
Mike Knowles - 121 Whittendale Drive, Moorestown, NJ 08057
Ronald Fouse - 6303 Ivy Lane Ste. 130 Greenbelt, MD 20770
Christine Courard - 121 Whittendale Drive, Moorestown, NJ 08057
0. 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.)
1. Nature of business or purposes to be conducted or promoted in Florida: IT Support Services
March L. Laga
Signature of a member or an authorized representative of a member.

Typed or printed name of signee

Ronald Fouse

(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.)

## 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.

Mission Solu	tions, LLC, the alternate to be used in	the state of Florida is:			
2. The name	and the Florida street addr	ess of the registered agent and office are	<del></del>		
	Corporation Service Cor	npany	<u>F</u> .c		
	<del> </del>	(Name)		12	
	1201 Hays Street		AH AN	AUG -	en Ind
	Florida Street	Address (P.O. Box NOT ACCEPTABLE)	38.6	<u> </u>	Special States
	Tallahassee	<sub>FL</sub> 32301		PH 12: 5	
		City/State/Zip	ORIDA	2	
liability compo agent and agre relating to the	any at the place designated ee to act in this capacity. I proper and complete perfo	~ /	ove stated limited ointment as registere as of all statutes th and accept the	ed -	

Filing Fee for Application
Designation of Registered Agent

**Certified Copy (optional)** 

5.00 Certificate of Status (optional)

\$ 100.00

\$ 25.00

\$ 30.00

SECRETARY OF STATE



12 AUG -1 PH 12: 51
SECKLISSEE, FLORIDA

# CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **MISSION SOLUTIONS LLC**, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since June 26, 2009, and is in good standing in this state.

OF THE STATE OF TH

Electronic Certificate
Certificate Number: C20120619-0090
You may verify this electronic certificate
online at http://www.nvsos.gov/

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on June 19, 2012.

ROSS MILLER Secretary of State



July 6, 2012

CATHERINE LILLY 6303 IVY LANE SUITE 130 GREENBELT, MD 20770

SUBJECT: MISSION SOLUTIONS, LLC

Ref. Number: W12000035879

We have received your document for MISSION SOLUTIONS, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 607.1502(4), 617.1502(4) or 608.502(4), Florida Statutes, this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report/uniform business report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report/uniform business report and penalty fees is \$638.75.

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) 245-6051.

Barbara Bostick Regulatory Specialist II

Letter Number: 912A00018217