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(Business Entity Name)				
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Certified Copies	Certificates	of Status		
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SUPPICIENCY OF FILING

2013 MAY 23 AH 10: 21
SECKETARY OF STATE
TALLAHASSEE, FLORIDA

Property of

B. BOSTICK
MAY **2 4** 2013

EXAMINER



ACCOUNT NO. : I2000000195		
REFERENCE : 621786 7807091		
AUTHORIZATION :		
COST LIMIT : \$ 125.00		
ORDER DATE : April 23, 2013		
ORDER TIME : 3:31 PM		
ORDER NO. : 621786-001		
CUSTOMER NO: 7807091		
	-	
FOREIGN FILINGS		
NAME: BLUEALLY, LLC	SECR TALLA	2013 H
XXXX QUALIFICATION (TYPE: <u>LL</u>)	JASS AXV	MAY 23 A
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:	FLOR	AH 10:
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING	<u> </u>	2
CONTACT PERSON: Susie Knight EXT# 52956		
EXAMINER:		

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: 1. BLUEALLY, 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.") (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) 12-01-2010 (Duration: Year limited liability company will cease to exist or "perpetual") (Date of Organization) (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 1919 Gallows Road, Suite # 600 Vienna, VA 22182 (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: Please See Attached 10. Attached is an original cartificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in 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: Professional Services Company 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

Patti Kelly, Member

Managing Members List

- 1. Anita Tanamala, 1919 Gallaows Road, Suite #600, Vienna VA 22182
- 2. Jim Jacobsen, 1919 Gallaows Road, Suite #600, Vienna VA 22182
- 3. Patti Kelly, 1919 Gallaows Road, Suite #600, Vienna VA 22182
- 4. Ravi Singh, 1919 Gallaows Road, Suite #600, Vienna VA 22182
- 5. Robert Keenan, 1919 Gallaows Road, Suite #600, Vienna VA 22182

SECRE LARY OF TAKE

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 nan	ne of the Limited Liability C	ompany is:	
If unavailal	ble, the alternate to be used i	n the state of Florida is:	
2. The nan	ne and the Florida street add	ess of the registered agent and office a	are:
	Corporation Service Company		201 St TAL
		(Name)	CRE LAH
	1201 Hays Street		2013 HAY 23 SECRETARY ALLAHASSE
	Florida Street Address (P.O. Box NOT ACCEPTABLE)		, m,
	Tallahassee	32301 FL	
		City/State/Zip	D 2

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.

Corporation Service Company

Sue G. Knight

Assistant Vice President

\$ 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 "BLUEALLY, 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-THIRD DAY OF MAY, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BLUEALLY, LLC" WAS FORMED ON THE FIRST DAY OF DECEMBER, A.D. 2010.

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

SECREDARY OF CHAIR

TALL AHASSEF, FLORID.

4905356 8300

130643908

Jeffrey W Bullock, Secretary of State

AUTHENTYCATION: 0456004

DATE: 05-23-13

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