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## **COVER LETTER**

TO:

Registration Section
Division of Corporations

■ \$125.00 Filing Fee

SUBJECT

Nakuuruq 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:

Ashley Rorrer	
Name of Person	_
Akima	
Firm/Company	_
13873 Park Center Road, Suite 400N	
Address $\geq$	2014
Herndon, VA 20171	
City/State and Zip Code	
ashley.rorrer.ctr@akima.com	
E-mail address: (to be used for future annual report notification)	The state of the s
For further information concerning this matter, please call:	58
Ashley Rorrer <sub>at</sub> 571 482-5331	
Name of Contact Person Area Code Daytime Telephone Number	_
MAILING ADDRESS:  Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314  STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle	
Tallahassee, FL 32301  Enclosed is a check for the following amount:	

□ \$155.00 Filing Fee &

Certified Copy

□ \$160.00 Filing Fee, Certificate

of Status & Certified Copy

□ \$130.00 Filing Fee &

Certificate of Status

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Nakuuruq Solutions, LLC (Name of Foreign Limited Liability Company; must	include	"Limited Liability Company," "L.L.C.," o	or "LLC.")		
(If name unavailable, enter alternate name adopted for the purpose Liability Company," "L.L.C," or "LLC.")	of tran	sacting business in Florida. The alternate r	name must i	nclude	"Limited
<sub>2.</sub> Alaska	3.	90-0127304			
(Jurisdiction under the law of which foreign limited liability company is organized)		(FEI number, if applic	cable)		
<sub>4.</sub> January 1, 2005					
(Date first transacted busine (See sections 605.0904 & 605.0	ss in Flo 0905, F.	orida, if prior to registration.) S. to determine penalty liability)			
5. 13873 Park Center Road, Suite	e 40	00N	·······································		
Herndon, VA 20171			WILL A	2014 A	Contract,
•		Principal Office)	25.7	20	- Parisante
<sub>6.</sub> 13873 Park Center Road, Suite	<u> 40</u>	<u>0N</u>	% m <del>&lt;</del> m = 1	<del>-</del>	
Herndon, VA 20171			FI.O.	Md	177
(N	Mailing	Address)	302	: 58	TE: No. of the leading of the leadin
7. The name, title or capacity and address of the	persoi	n(s) who has/have authority to n	nanage is		
Donald Atwell, President; Allen Ticket	Sr.,	Secretary/Treasurer; La	arry Me	echn	er,
Assistant Secretary; Richard Hea	adri	ck, Assistant Treasur	er		
13873 Park Center Road, Suite	400	N, Herndon, VA 2017	<b>7</b> 1		
8. Attached is an original certificate of existence, a having custody of records in the jurisdiction under acceptable. If the certificate is in a foreign language must be submitted)	r the l	aw of which it is organized. (A	photocop	y is n	ot

Signature of an authorized person
(In accordance with section 605.0203, 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.)

Ashley Rorrer

Typed or printed name of signee

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), 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 Co	mpany is:			
Nakuuruo	Solutions, LL	.C			
If unavailable, the	ne alternate to be used in	the state of Florida is:			
2. The name and	I the Florida street addre	ess of the registered agent and office are:	A C	2014 APR	7
C T Corporation System		SS# X¥X	4-1	ALMANIA.	
•		(Name)	- EN (	PM	
	1200 South P	ine Island Road	01.40	<del>]:</del> 5	THE SECTION
-	Florida Street	Address (P.O. Box NOT ACCEPTABLE)	٠٠٠ مري —	9	
	Plantation	<sub>FL</sub> 33324			
-		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 605, Florida Statutes.

Todd B. Proper
Vice President and Assistant Secretary

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

