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(Re	equestor's Name)	
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COVER LETTER

		tion Section of Corporation	s					
SUBJEC		e Fox Governme	ent Services, LLC					
SOBSEC	•• —	Name of Limited Liability Company						
The enclose Existence,	sed "Ap	plication by Fore	eign Limited Liability Compa I to register the above refere	any for Authorizanced foreign limit	tion to Trai ed liability	nsact Business in Florida," Certificate o company to transact business in Florida		
Please reti	urn all c	orrespondence c	oncerning this matter to the f	ollowing:				
		Crystal Blair						
Name of Person								
	Cape Fox Corporation							
		PO Box 8558						
	•	Address						
	Ketchikan, AK 99901							
	·		City/Sta	ate and Zip Code				
	C	Tystal.Blair@ca	•					
			E-mail address: (to be used	for future annual	report noti	fication)		
For further	r inform	ation concerning	this matter, please call:					
(Crystal E	Blair		907 _ at (225-516 _)			
		Name of	Contact Person	Area Code	Dayt	ime Telephone Number		
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314			ADDRESS: of Corporations on Section ailding cutive Center Circle ce, FL 32301					
		k for the followi O Filing Fee	ng amount: ☐ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filin Certified Copy	g Fee &	□ \$160.00 Filing Fee, Certificate of Status & Certified Copy		

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 BY SINESS IN THE STATE OF FLORIDA:

Cape Fox Government	Services, LLC lign Limited Liability Company; mus	et inclu	de "I imited I jahi	lity Compa	my""IIC"o	- "II C "\				
(Name of Pole	igh Emilieu Etabliky Company, mus	n meiu	de Ellitted Elabi	my Compa	ally, L.L.C., 0	i bbc.)				
iability Company," "L.L.C,	ternate name adopted for the purpose or "LLC.")	e of tra	nsacting business	in Florida.	The alternate na	ime must is	nclude "	Limited		
Alaska		3.	20-0475784							
(Jurisdiction under the law of which foreign limited liability company is organized) (FE)					FEI number, if applicable)					
12/7/2012										
•	(Date first transacted busine (See sections 605.0904 & 605.	ss in F	lorida, if prior to t	egistration	l.) hility)	_				
7050 Infantry Ridge Ro	oad, Manassas, VA 20109	0705,	i.s. to determine	penany na	onity)					
·						_				
						_				
DO D 0550 W 13	(Street Address of I	'rincip:	al Office)							
PO Box 8558, Ketchika	in, AK 99901									
	(Mailing A	Addres	s)			-				
. Name and street addres	s of Florida registered agent: (P.	O. Bo	x <u>NOT</u> accepta	ble)			16 JUN			
Name:	C T Corporation System					至	=			
Name.	1200 South Pine Island Road					SS	23	· · · · · · · · · · · · · · · · · · ·		
Office Address:	1200 South Fine Island Road					mi∹ m:≕				
	Plantation			, Florida	33324		3	guerners.		
	(City)				(Zip code)	유등	5	Supple to be .		
legistered agent's accept Javing been named as re-	tance: gistered agent and to accept serv	vice of	nracess for the	above sta	ited limited lia	hility com	-	t the place		
lesignated in this applicat	tion, I hereby accept the appoint	ment	as registered ag	ent and a	gree to act in t	his capac	ity. I fi	urther agi		
	ons of all statutes relative to the ny position as registered agent.	prope	r and complete j	performa	nce of my dutic	es, and I o	ım fan	uliar with		
	C T Corporation Sy	ystem								
	By:		gent's signature)			_				
	(Regist	ered ag	cin s signature)							
3. The name, title or capa	city and address of the person(s)	who h	nas/have authorit	y to mana	ige is/are:					
Shane Muncy, Manager, 7	7050 Infantry Ridge Road, Manas	ssas, V	A 20109				_			
	•									
										
							_			
. Attached is a certificate	of existence, no more than 90 da	ys old	, duly authentica	ited by the	official having	g custody	of reco	ords in the		
urisdiction under the law o	of which it is organized. (If the co	ertifica	ate is in a foreign	ı language	e, a translation	of the cer	tificate	under oat		
f the translator must be su										
	Signature	54	ai							
	Signature	of an a	uthorized person			_ _				
his document is executed ubmitted in a document to	in accordance with section 605.0 the Department of State constitu)203 (tes a t	l) (b), Florida St hird degree felot	atutes. I a	m aware that a	ny false in 7.155, F.	nformat S.	ion		
	Clifford Blair, President		_	- •						

Typed or printed name of signee

Alaska Entity #84007D

State of Alaska Department of Commerce, Community, and Economic Development

Corporations, Business, and Professional Licensing

Certificate of Compliance

The undersigned, as Commissioner of Commerce, Community, and Economic Development of the State of Alaska, and custodian of corporation records for said state, hereby issues a Certificate of Compliance for:

Cape Fox Government Services, LLC

This entity was formed on December 12, 2003 and is in good standing. This entity has filed all biennial reports and fees due at this time.

No information is available in this office on the financial condition, business activity or practices of this corporation.



IN TESTIMONY WHEREOF, I execute the certificate and affix the Great Seat of the State of Alaska effective **May 18, 2016**.

Chris Hladick Commissioner

Of Halix