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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195 REFERENCE : 270463 8090943 AUTHORIZATION : COST LIMIT : ORDER DATE: August 29, 2016 ORDER TIME : 3:53 PM ORDER NO. : 270463-010 CUSTOMER NO: 8090943 FOREIGN FILINGS NAME: ORDNANCE MANAGMENT ASSOCIATES, $_{
m LLC}$ XXXX QUALIFICATION (TYPE: LL) PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: _ CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

EXAMINER:

CONTACT PERSON: Melissa Zender -- EXT# 62956

COVER LETTER

TO:	Registrati Division o	on Section f Corporation	ns				
SUBJI	Ordna	nce Managen	ent Associates, LLC				
30,031		······································	Name o	f Limited Liability	Company		
The en Exister	closed "Appl ice, and chec	ication by For k are submitte	eign Limited Liability Con d to register the above refe	npany for Authoriz renced foreign lim	ation to Tr ited liabilit	ansact Business in Florida," (y company to transact busine	Certificate of ess in Florida
Please	return all cor	respondence o	concerning this matter to th	e following:			
	M	lichelle Trepa	nier				
			1	Name of Person			
	1/	AP Worldwide	e Services, Inc.				
	_			Firm/Company			
	7:	315 N. Atlanti	c Avenue				
				Address		· · · · · · · · · · · · · · · · · · ·	
	C	ape Canavera	I,FL 32920			nimalij.	
	City/State and Zip Code						20 · · · · · · · · · · · · · · · · · · ·
	mic	helle.trepanie	r@iapws.com			구 10 <u>m</u> ph 가 51	10 3 No. 3
For fur	ther informat	ion concerning	E-mail address: (to be use this matter, please call:	ed for future annua	l report not	tification)	
	Karen Sha	ffner		321 at (784-72)	42 Sp. 2	2 5 5
		Name o	f Contact Person	Area Code	Day	time Telephone Number	ਹੌਂ।
		327	(Division Registrat Clifton B 2661 Exc	of Corporations ion Section duilding secutive Center Circle see, FL 32301	
Enclose	ed is a check \$125.00	for the follow Filing Fee	ing amount: \$\Bigcup \\$130.00 \text{ Filing Fee & Certificate of Status}\$	□ \$155.00 Filin Certified Copy	_	☐ \$160.00 Filing Fee, Cer of Status & Certified Copy	

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

IN COMPILANCE 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:

	Associates, LLC		
(Name of For	t Associates, LLC eign Limited Liability Company; must include "l	Limited Liability Company," "L.L.C.	." or "LLC.")
Liability Company," "L.L.C.	ternate name adopted for the purpose of transac "or "LLC.")	ting business in Florida. The alternate	e name must include "Limited
2. Delaware	3.		
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applie	able)
4.			
	(Date first transacted business in Florid (See sections 605.0904 & 605.0905, F.S.)	a. if prior to registration.) to determine penalty liability)	
5. 7315 N. Atlantic Ave			·····
Cape Canaveral, FL	32920		
	(Street Address of Principal Of	fice)	
6. 7315 N. Atlantic Avenue	ae		75 CO
Cape Canaveral, FL 32	920		
	(Mailing Address)		
7. Name and street address	s of Florida registered agent: (P.O. Box N		
Name:	Corporation Service Company		5 5
Office Address:	1201 Hays Street		
	Tallahassee	Florida 32301 (Zip code	
	(City)	(Zip code	2)
this application, I hereby	gistered agent and to accept service of procaccept the appointment as registered agent statutes relative to the proper and complete tion as registered agent. Corporation Service Company	t and agree to act in this cupacity	. I further agree to comply
	Ву:	Tuten	• •
	(Registered agent's	signature)	Asst. Vice President
8. The name, title or capa	city and address of the person(s) who has/h	ave authority to manage is/are:	
David Craig, Chairman ar	nd Manager, 7315 N. Atlantic Avenue, Cape	Canaveral, FL 32920	
Frederick Nohmer, Manag	ger, 7315 N. Atlantic Avenue, Cape Canave	ral, FL 32920	-
Michelle Trepanier, Assis	tant Secretary, 7315 N. Atlantic Avenue, Ca	ape Canaveral, FL 32920	
jurisdiction under the law of the translator must be su	of existence, no more than 90 days old, duly of which it is organized. (If the certificate is abmitted) Signature of an authorized.	in a foreign language, a translatio	ring custody of records in the on of the certificate under oath
	The state of the s	inea person	
This document is executed submitted in a document to	in accordance with section 605.0203 (1) (by the Department of State constitutes a third state constitutes as the constitutes as), Florida Statutes. I am aware tha degree felony as provided for in s	t any false information .817.155, F.S.
	Michelle Trepanier		

Typed or printed name of signee

Page 1

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "ORDNANCE MANAGEMENT ASSOCIATES, 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 THIRTY-FIRST DAY OF AUGUST, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ORDNANCE

MANAGEMENT ASSOCIATES, LLC" WAS FORMED ON THE TWENTY-NINTH DAY OF

AUGUST, A.D. 2016.

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

Authentication: 202916134

Date: 08-31-16

6136730 8300 SR# 20165594441