

MI6000007301

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

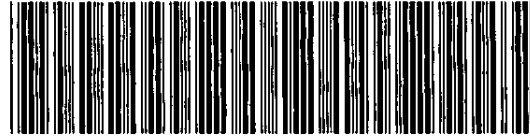
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2821 W16-51232

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 22, 2016

ALAN P ALLEGRETTO  
101 MARKETSIDE AVENUE STE 404-352  
PONTE VEDRA, FL 32081

SUBJECT: GOVSCIENCE PARTNERS LLC  
Ref. Number: W16000051232

We have received your document for GOVSCIENCE PARTNERS 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):

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

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.

Shelia H Young  
Regulatory Specialist II

Letter Number: 716A00015410

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7 SEPT 16.

(\*) Requested document is attached at rear.

Thank you,  
Alan Allegretto  
571-252-8200

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: GOVSCIENCE PARTNERS 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:

ALAN P. ALLEGRETTO  
Name of Person  
GOVSCIENCE PARTNERS LLC  
Firm/Company  
101 MARKETSIDE AVE., SUITE 404-352  
Address  
PONTE VEDRA, FL 32081  
City/State and Zip Code  
AALLEG@GOVSCIENCE.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ALAN P. ALLEGRETTO at (571) 252-8200  
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:

☒ \$125.00 Filing Fee    ☐ \$130.00 Filing Fee & Certificate of Status    ☐ \$155.00 Filing Fee & Certified Copy    ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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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. GOVSCIENCE PARTNERS 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. The alternate name must include "Limited Liability Company," "L.L.C." or "LLC.")

2. NEW JERSEY 3. \_\_\_\_\_  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 101 MARKETSIDE AVE., SUITE 404-352  
PONTE VEDRA, FL 32081  
(Street Address of Principal Office)

6. 101 MARKETSIDE AVE., SUITE 404-352  
PONTE VEDRA, FL 32081  
(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: ALAN P. ALLEGRETTO  
Office Address: 101 MARKETSIDE AVE., SUITE 404-352  
PONTE VEDRA, Florida 32081  
(City) (Zip code)

Registered agent's acceptance:

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 application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

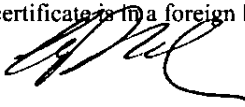


(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

ALAN P. ALLEGRETTO  
GOVSCIENCE PARTNERS LLC, MANAGING PARTNER  
101 MARKETSIDE AVE, SUITE 404-352, PONTE VEDRA, FL  
32081

9. Attached is a certificate 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. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)



Signature of an authorized person

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

ALAN P. ALLEGRETTO

Typed or printed name of signee

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**STATE OF NEW JERSEY  
DEPARTMENT OF THE TREASURY  
DIVISION OF REVENUE AND ENTERPRISE SERVICES  
SHORT FORM STANDING**

**GOVSCIENCE PARTNERS LLC**

0400093801

*I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on May 27, 2005.*

*As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.*

*I further certify that the registered agent and office are:*

ALAN P ALLEGRETTO  
566 KINGSLEY COURT  
TOMS RIVER, NJ 08753



IN TESTIMONY WHEREOF, I have  
hereunto set my hand and affixed  
my Official Seal at Trenton, this  
7th day of September, 2016

Ford M. Scudder  
Acting State Treasurer

Certificate Number : 6074088412

Verify this certificate online at

[https://www1.state.nj.us/TYTR\\_StandingCert/JSP/Verify\\_Cert.jsp](https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp)

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## STATE OF NEW JERSEY BUSINESS REGISTRATION CERTIFICATE

**Taxpayer Name:** GOVSCIENCE PARTNERS LLC  
**Trade Name:** GOVSCIENCE  
**Address:** 10 INDEPENDENCE TRAIL  
TOTOWA, NJ 07512-2800  
**Certificate Number:** 1161195  
**Effective Date:** June 28, 2005  
**Date of Issuance:** July 16, 2016

**For Office Use Only:**  
**20160716220819740**

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