(Re	questor's Name)			
(Ad	dress)			
(Add	dress)			
(Cit	y/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nai	me)		
(Document Number)				
Certified Copies	_ Certificate	s of Status		
Special Instructions to	Filing Officer:			

Office Use Only



200299039682

05/15/17--01044--012 **130.00

MAY 1 6 2017 ^'!LKER

COVER LETTER

TO:	Registration Section		
	Division of Corporations		

Bowhead Operations & Maintenance 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:
Shobana Mohan
Name of Person
UIC Government Services, LLC
Firm/Company
4900 Seminary Road, Suite 1200
Address
Alexandria, VA 22311
City/State and Zip Code
taxcompliance@bowheadsupport.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
(703)578-5548
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

Enc	locad	ic a	chook	fortha	following	amount:
Enc	iosea	is a	cneck	ior ine	TOHOWING	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

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 COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Bowhead Operation (Name of Foreign	is & Maintenance Solutions, LLC Limited Liability Company, must include "Limit	ted Liability Company," "L.L.C.," or "LLC.")			
(If name unavailable, enter alternate r	name adopted for the purpose of transacting business in F	forida. The alternate name must include "Limited Liab	ility Company," "LLC," or "LLC.")		
_{2.} Alaska		3. 63886D			
	hich foreign limited liability company is organized)		er, if applicable)		
4. 01/04/2016	(Data five transported business in Florida, if avior to	to vericination)			
	(Date first transacted business in Florida, if prior t (See sections 605.0904 & 605.0905, F.S. to deter				
5. 4900 Seminary Roa (Street Address of I	ad, Suite 1200	6. 4900 Seminary Road, S	4900 Seminary Road, Suite 1200 (Mailing Address)		
Alexandria, VA 223	- · · · · · · · · · · · · · · · · · · ·		Alexandria, VA 22311		
	<u></u>				
7. Name and street address	ss of Florida registered agent: (P O. Bo	x <u>NOT</u> acceptable)			
Name:	Corporation Service Company				
Office Address:	1201 Hays Street,				
	Tallahassee	, Florida <u>32301</u> (Zip code	,		
designated in this applicate to comply with the provise and accept the obligation. 8. The name, title or capa Title or Capacity: Vice President of Operations	egistered agent and to accept service of the propertion, I hereby accept the appointment tions of all statutes relative to the property of the present agent. Registered agent (Registered agent) Registered agent (Registered agent) Registered agent (Registered agent) Alexandria of the person(s) who have and Address: Terry W. Moore 4900 Seminary Road, State # 1200 Alexandria, VA 22311	f process for the above stated limited as registered agent and agree to act is and complete performance of my a kelli, Sn is signature)	liability company at the place in this capacity. I further agree luties, and I am familiar with		
(Use attachments if necess	sary)				
	Signatur	e of an authorized person			
	uted in accordance with section 605.020 o the Department of State constitutes a th	03 (I) (b), Florida Statutes. I am aware hird degree felony as provided for in s			
	Terry W. Moore, Vice President of	of Operations			

Typed or printed name of signee

Alaska Entity #63886D

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:

Bowhead Operations & Maintenance Solutions, LLC

This entity was formed on May 19, 1998 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 Seal of the State of Alaska effective **May 04, 2017**.

Chris Hladick Commissioner

Oh Halix