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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 POLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED HARILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

name unavailable, enter alternate	name adopted for the purpose of transacting business in Flo	orida The al	ternate name must include "Limited Liability Company," "L L C," or "Ll.
TEXAS		3.	27-0908659
(furisdiction under the law of which foreign limited liability company is organized		(Ffil number, if applicable)	
			ALLAHASS ALLAHASS
	(Dute first transacted business in Florida, if prior to (See sections 605 0904 & 605,0905, F.S. to determ	registration ine penalty	mbility)
3000 C STREET, SUITE 301 (Street Address of Frincipal Office)		6,	3000 C STREET, SUITE 301 TO COMPANY Address) TU TO THE STREET OF THE STR
•	• ,		(Mailing Address)
ANCHORAGE, AK 9	9503		ANCHORAGE, AK 99503
Name and street addre	ss of Florida registered agent: (P.O. Box	NOT a	cceptable)
Name and street addre	ss of Florida registered agent: (P.O. Box UNISEARCH, INC.	NOT a	cceptable)
	· ·	NOT a	cceptable)

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 Spent's signature) Jose Castellanos, Assistant Secretary

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]: Title or Capacity: Name and Address: Title or Capacity: Name and Address: Name: The Chenega Corporation Manager Manager | Name: 3000 C STREET, SUITE 301 Member Address: Member Address: ANCHORAGE, AK 99503 ■Authorized ☐ Authorized Person Person Other Other\_ Other Manager Name: \_\_\_\_ Manager Manager Member Address: ☐ Member Address: Authorized Authorized Person Person Other\_ Other\_\_\_\_ Other Other Manager Manager Manager Name: ☐Member Address: ☐ Mcmber Address: Authorized Authorized Person Person Other Other\_\_\_\_ Other\_ Other\_\_\_\_ Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed individuals may be added to the index when filing your Florida Department of State Annual Report form. 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) 10. 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.

Peter C. Nosek, SR VP, Legal & GC, The Chenega Corporation, Manager

Typed or printed name of signee



## Office of the Secretary of State

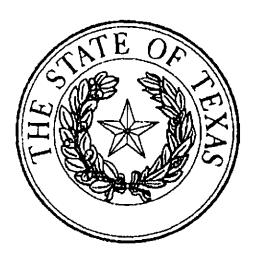
#### Certificate of Fact

The undersigned, as Deputy Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Ajanta Consulting, LLC. (file number 801168748), a Domestic Limited Liability Company (LLC), was filed in this office on September 10, 2009.

It is further certified that the entity status in Texas is in existence.

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In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on July 02, 2019.



Jose A. Esparza Deputy Secretary of State