

M24 00005568

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H24000155212 3)))



H240001552123ABCW

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (614)280-3338
Fax Number : (614)573-3996

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: accounting@bisongroupusa.com

**Foreign Limited Liability Company
The Bison Group LLC**

| | |
|-----------------------|----------|
| Certificate of Status | 0 |
| Certified Copy | 1 |
| Page Count | 05 |
| Estimated Charge | \$932.50 |

Requesting original filing date of 3/1/24. Original coversheet was abandon in error. Thank you!

2024 MAR -1 / 11:33

[Electronic Filing Menu](#)

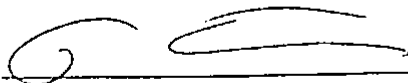
[Corporate Filing Menu](#)

[Help](#)

MAY 01 2024
K. Brumbley

The Bison Group LLC
1768 Business Center Drive, Suite 130
Reston VA 20190

Bison Group LLC, a limited liability company with DOC ID M22000000793 (the Company), was filed incorrectly in the state of Florida. The Company is releasing the name for use to another entity and hereby consents to The Bison Group LLC, a Virginia limited liability company, using the name The Bison Group, LLC when registering with the Florida Department of State.

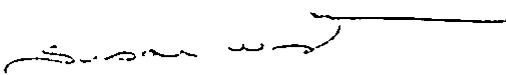
By: 

Name: Paul Courtney

Title: CEO

COMMONWEALTH OF VIRGINIA
STATE OF FAIRFAX.

SUSAN WISDOM
NOTARY PUBLIC
Commonwealth of Virginia
Reg. # 7944570
My Comm. Expires October 31, 2025

NOTARY: 
SUSAN WISDOM

NOTARY EXPIRATION: OCTOBER 31, 2025
REG # : 7944570

2024 FEB -1 AM 11:33

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. The Bison Group 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. Virginia 90-0910890
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 1/14/2022
(Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 1768 Business Center Drive
(Street Address of Principal Office)
Suite 130
Reston, VA 20190

6. 1768 Business Center Drive
(Mailing Address)
Suite 130
Reston, VA 20190

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

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324
(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.

C T Corporation System
By: Christine Kelm, Assistant Secretary
(Registered agent's signature)

2024 MAR - 1 AM 11:33

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]:

| <u>Title or Capacity:</u> | <u>Name and Address:</u> | <u>Title or Capacity:</u> | <u>Name and Address:</u> |
|--------------------------------------------|--------------------------------------------|------------------------------------------------|--------------------------------------------|
| <input type="checkbox"/> Manager | Name: <u>Paul Courtney</u> | <input type="checkbox"/> Manager | Name: <u>Meagan Watson</u> |
| <input checked="" type="checkbox"/> Member | Address: <u>1768 Business Center Drive</u> | <input checked="" type="checkbox"/> Member | Address: <u>1768 Business Center Drive</u> |
| <input type="checkbox"/> Authorized | <u>Suite 130</u> | <input type="checkbox"/> Authorized | <u>Suite 130</u> |
| Person | <u>Reston, VA 20190</u> | Person | <u>Reston, VA 20190</u> |
| <input type="checkbox"/> Other _____ | <input type="checkbox"/> Other _____ | <input type="checkbox"/> Other _____ | <input type="checkbox"/> Other _____ |
| | | | |
| <input type="checkbox"/> Manager | Name: <u>Paul O'Brien</u> | <input type="checkbox"/> Manager | Name: <u>Jeremy Mallicoat</u> |
| <input checked="" type="checkbox"/> Member | Address: <u>1768 Business Center Drive</u> | <input type="checkbox"/> Member | Address: <u>1768 Business Center Drive</u> |
| <input type="checkbox"/> Authorized | <u>Suite 130</u> | <input checked="" type="checkbox"/> Authorized | <u>Suite 130</u> |
| Person | <u>Reston, VA 20190</u> | Person | <u>Reston, VA 20190</u> |
| <input type="checkbox"/> Other _____ | <input type="checkbox"/> Other _____ | <input type="checkbox"/> Other _____ | <input type="checkbox"/> Other _____ |
| | | | |
| <input type="checkbox"/> Manager | Name: _____ | <input type="checkbox"/> Manager | Name: _____ |
| <input type="checkbox"/> Member | Address: _____ | <input type="checkbox"/> Member | Address: _____ |
| <input type="checkbox"/> Authorized | _____ | <input type="checkbox"/> Authorized | _____ |
| Person | _____ | Person | _____ |
| <input type="checkbox"/> Other _____ | <input type="checkbox"/> Other _____ | <input type="checkbox"/> Other _____ | <input type="checkbox"/> Other _____ |

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed 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.

Jeremy Mallicoat
Signature of an authorized person

Jeremy Mallicoat - CFO

Typed or printed name of signee

Commonwealth of Virginia



State Corporation Commission

CERTIFICATE OF FACT

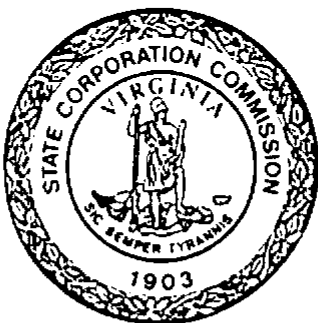
I Certify the Following from the Records of the Commission:

That THE BISON GROUP LLC is duly organized as a Limited Liability Company under the law of the Commonwealth of Virginia;

That the Limited Liability Company was formed on November 28, 2012; and

That the Limited Liability Company is in existence in the Commonwealth of Virginia as of the date set forth below.

Nothing more is hereby certified.



Signed and Sealed at Richmond on this Date:

February 8, 2024

A handwritten signature in black ink, appearing to read "Bernard J. Logan".

Bernard J. Logan, Clerk of the Commission