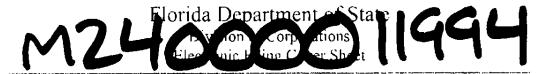
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Division of Corporations



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(((H24000318541 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (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:

legal@gmail.com

Foreign Limited Liability Company ECS Midwest, LLC

Certificate of Status	0
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Page Count	04
Estimated Charge	\$155.00

Electronic Filing Menu Corporate Filing Menu

Help

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

IN COMPUANCE WITH SECTION 6(8,000), FLORIDA STATUTEN THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED DABIDTY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

ECS. Midwest, LLC.

it name maximilable, enter alternate	name adopted for the purpose of transacting business in Flo	rida. The alternate name in	ist include "Limited Liabi	ity Company," "E.E.C." or "El C.
Virgina		3.		
(Jurisdiction ender the law of w	ench fereign limited hability company is organized)	<u> </u>	(FLI number,	(Capplicable)
·				
	(Date first clausacted business in Florida, if prior to is (See sections 605 0904 of 605 0905, F.S. to determin	e penuliy hability) epitration (
14030 Thunderbolt Pl		14030 Thune 6.	derbult PI	
treet Address of Principal Offices		(Mailing A	(ddf.ess)	
Chantilly, VA 20151		Chantilly, V.	A 20151	
				
				2024 \$1.
. Name and street addres	ss of Florida registered agent: (P.O. Box	NOT acceptable)		. 82
	CT Comment on Secretary			
Name:	C.T Corporation System	·		8 :
	1200 South Pinc Island Road			
Office Address:				- 1 4 4
	Plantation		33324	36
	(City)	; Flor	ida	<u> </u>

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.

By:	CT, Corporation System	Deutse Bell - Asst Secretary			
(Registered agent's signature)					

From: David Thomas

8.	For initial indexing purposes,	list names	title or capacity	and addresses	of the primary	members/managers	or persons author	ized to
ma	nage lup to six (6) totall:							

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
_iManager	Name: Brent Gaskin	_ Manager	Name: Alagaiya Veeramani
X Member	Address: 14030 Thunderbolt Pl	⊼Member	Address:
□Authorized	Chantilly, VA 20151	☐ Authorized	Chantilly, VA 20151
Person		Person	
□Other	Other	□Other	□ Other □
□Manager	Name: Chris Lopez	∏ Manager	Name:
X Member	Address: 14030 Thunderbolt Pl	X Member	Address: 14030 Thunderbolt Pl
□ Authorized	Chantilly, VA 20151	-Authorized	Chantilly, VA 20151
Person		Person	
Other			
□Manager	Name:	□Manager	Name:
T.Member	Address:	Member	Address:
□Authorized		□ Authorized	
Person		Person	
□Other	()ther	TOther	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.

Chris L	opez		
		Signature of an authorized person	
Chris Lopez			
		Lyped or minted name of signer	

To:

Commonboealth of Hirginia



State Corporation Commission

CERTIFICATE OF FACT

1 Certify the Following from the Records of the Commission:

That ECS Midwest, 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 April 16, 2004; 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:

September 17, 2024

Bernard J. Logan, Clerk of the Commission