

M250000001485

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

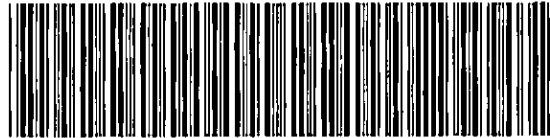
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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APPROVED
AND
FILED

2025 JAN 30 PM 3:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED

2025 JAN 30 PM 12:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JAN 31 2025

K. Brumbley

Sunshine State Corporate Compliance Company

(2)

3458 Lakeshore Drive, Tallahassee, Florida 32312

(850) 656-4724

DATE 01/30/2025

****WALK IN****

ENTITY NAME RUAG LLC

DOCUMENT NUMBER _____

****PLEASE FILE THE ATTACHED AND RETURN****

XXXX

Plain Copy

Certified Copy

Certificate of Status

****PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY****

Certified Copy of Arts & Amendments

Certificate of Good Standing

****APOSTILLE / NOTARIAL CERTIFICATION****

COUNTRY OF DESTINATION _____

NUMBER OF CERTIFICATES REQUESTED _____

TOTAL OWED \$155.00

ACCOUNT #: 120160000072

E. R. J. J.

Please call Tina at the above number for any issues or concerns. Thank you so much!

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: RUAG 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:

Laurel Swope

Name of Person

Baker Donelson Bearman Caldwell & Berkowitz, PC

Firm/Company

1901 Sixth Avenue North, Suite 2600

Address

Birmingham, AL 35203

City/State and Zip Code

lswope@bakerdonelson.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Laurel Swope

205

250-8383

at (_____) _____

Name of Contact Person

Area Code

Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$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
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. RUAG 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. Delaware
(Jurisdiction under the law of which foreign limited liability company is organized)

3. _____
(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. 2325 Dulles Corner Blvd., Ste. 430
(Street Address of Principal Office)

6. 2325 Dulles Corner Blvd., Ste 430
(Mailing Address)

Herndon, VA 20171-4674

Herndon, VA 20171-4674

USA

USA

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

Name: NRAI Services, Inc.

Office Address: 1200 South Pine Island Rd

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.

NRAI Services, Inc.
By: Natalie Leiba-Paul Natalie Leiba-Paul - Assistant Secretary
(Registered agent's signature)

APPROVED
AND
FILED
2025 JAN 30 PM 3:15
CLERK OF STATE
TALLAHASSEE, FLORIDA

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:**

☐ Manager Name: RUAG MRO Holding Ltd

☒ Member Address: Stauffacherstrasse 65

☐ Authorized 3000 Bern 22 - Switzerland

Person

☐ Other ☐ Other

☒ Manager Name: Ralf Muller

☐ Member Address: Stauffacherstrasse 65

☐ Authorized 3000 Bern 22 - Switzerland

Person

☐ Other ☐ Other

☐ Manager Name: W. Craig Hummer

☐ Member Address: 2325 Dulles Corner Blvd.

☐ Authorized Herndon, VA 20171-4674

Person

☒ Other President ☐ Other

Title or Capacity: **Name and Address:**

☒ Manager Name: Christian Priller

☐ Member Address: 2325 Dulles Corner Blvd.

☐ Authorized Herndon, VA 20171-4674

Person

☐ Other ☐ Other

☒ Manager Name: Oliver Muller

☐ Member Address: Stauffacherstrasse 65

☐ Authorized 3000 Bern 22 - Switzerland

Person

☐ Other ☐ Other

☐ Manager Name: Michael H. Johnson

☐ Member Address: 1901 Sixth Ave. No, Ste 2600

☐ Authorized Birmingham, AL 35203

Person

☒ Other Secretary ☐ 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.



d person

Michael H. Johnson

Typed or printed name of signee

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT "RUAG LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT HAVING BEEN CANCELLED OR REVOKED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

THE FOLLOWING DOCUMENTS HAVE BEEN FILED:

CERTIFICATE OF INCORPORATION, FILED THE TWENTY-EIGHTH DAY OF OCTOBER, A.D. 2019, AT 1:28 O`CLOCK P.M.

CERTIFICATE OF CONVERSION, CHANGING ITS NAME FROM "RUAG INC." TO "RUAG LLC", FILED THE SECOND DAY OF JANUARY, A.D. 2025, AT 5:01 O`CLOCK P.M.

CERTIFICATE OF FORMATION, FILED THE SECOND DAY OF JANUARY, A.D. 2025, AT 5:01 O`CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CERTIFICATES ARE THE ONLY CERTIFICATES ON RECORD OF THE AFORESAID LIMITED LIABILITY COMPANY, "RUAG LLC".

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.



7675580 8310

SR# 20250092693

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature in black ink, appearing to read "JB", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Authentication: 202666275

Date: 01-10-25