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Alison Lundergan Grimes Kentucky Secretary of State Received and Filed: 5/2/2014 12:00 AM

Fee Receipt: \$90.00



COMMONWEALTH OF KENTUCKY ALISON LUNDERGAN GRIMES, SECRETARY OF STATE

Division of Business Filings Business Filings PO Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov	Certificate of Authority (Foreign Business En			FBE	
Pursuant to the provisions of KRS 14A a on behalf of the entity named below and,	nd KRS 271B, 273, 274,275, 362 and for that purpose, submits the followin	1 386 the undersigned her	eby applies for aut	thority to transact business in Kenti	- uck
1. The entity is a : profit corpo business to	oration (KRS 271B) nonprofit	corporation (KRS 273). bility company (KRS 275)	profession profession	nal service corporation (KRS 274), nal limited liability company (KRS 2	75).
2. The name of the entity is Advitan	n, Inc. st be identical to the name on record with	th the Secretary of State 1			
3. The name of the entity to be used in K		in the Secretary of State.)			
ŕ	(Only provide	e if "real name" is unavaila	ole for use; otherwis	se, leave blank.)	
4. The state or country under whose law	the entity is organized is Delaw	/are			
5. The date of organization is $\frac{05/15/2}{}$	001	and the period of duration	n ic		
6. The mailing address of the entity's prin	cipal office is	and the period of duration	(If le	eft blank, the period of duration is considered perpetual.)	·'
44880 Falcon Place Suite 19	98	Sterling	VA	20166	
Street Address		City	State	Zip Code	-
7. The street address of the entity's regist	tered office in Kentucky is				
421 West Main Street		Frankfort	KY	40601	
Street Address (No P.O. Box Numbers)		City	State	Zip Code	
and the name of the registered agent at the second of the registered agent at the second of the names and business addresses of Michael Louis 4		y, officers and directors, r	nanagers, trustees	or general partners):	
***************************************	treet or P.O. Box	City	VA State	20166	_
Benoit Kroely	14880 Falcon Place # 198	•	VA	Zip Code 20166	
Name S	treet or P.O. Box	City	State	Zip Code	
Eric Waser	14880 Falcon Place # 100	Sterling	VA	20166	
Name S	treet or P.O. Box	City	State	Zip Code	
 If a professional service corporation, all and treasurer are licensed in one or more statement of purposes of the corporation. 	the individual shareholders, not less t states or territories of the United State	han one half (1/2) of the c es or District of Columbia	lirectors, and all of to render a profess	the officers other than the secretar sional service described in the	У
10. I certify that, as of the date of filing this	application, the above-named entity	validly exists under the la	ws of the jurisdictio	n of its formation.	
If a limited partnership, it elects to be	e a limited liability limited partnership	p. Check the box if app	licable:	··· v· no rotinidaditi	
12. This application will be effective upon fi The effective date or the delayed effective	lling, unless a delayed effective date a date cannot be prior to the date the a	and/or time is provided. pplication is filed. The da	te and/or time is		
	Rono	it Krooly COO	(D	Delayed effective date and/or time)	-
Signature of Authorized Representative	Dello	it Kroely, COO Printed Name & Title		4/11/20/4	_
CSC-LAWGES INDRAWA TypePrint Name of Registered Agent	$\Delta \omega = \sum_{i=1}^{n} i \sum_{i=1}^$	ent to serve as the registe	red agent on behal	If of the business entity.	
HEROMAT		ont Wilcons,	Assistant	WP Ulinla	1
Signature of Registered Agent 01/12)	Printed Name	Title		Date	.1

FILING INSTRUCTIONS APPLICATION FOR CERTIFICATE OF AUTHORITY FOR A FOREIGN BUSINESS ENTITY

TYPE OF FORMATION

The corporation must indicate if it is a corporation (KRS 271B), a nonprofit corporation (KRS 273), a professional service corporation (KRS 274), a business trust (KRS 386), a limited liability company (KRS 275) or a limited partnership (KRS 362) by checking the appropriate box.

The business entity name must be exactly as written in the home state and comply with the ending requirements of KRS 14A.3-010.

DATE OF ORGANIZATION AND DURATION

The date of organization is the date the business entity filed with the secretary of state or other official having custody of corporate records. The period of duration of the business entity is that period which is stated in the organization filing. (May be perpetual or a total number of years.)

PRINCIPAL OFFICE ADDRESS

The principal office is the office (in or out of this state) so designated in writing with the Office of the Secretary of State where the principal designated office of the business entity is located. This address is where all correspondence from the Office of the Secretary of State (See Document Delivery) will be mailed.

REGISTERED OFFICE AND REGISTERED AGENT

The registered office of the business entity must be in Kentucky and maintain a street address (a PO Box is insufficient for the registered office address). In order to transact business in Kentucky, the registered agent shall be an individual resident of Kentucky, a Kentucky domestic corporation, a Kentucky domestic non-corporation, a Kentucky domestic limited liability company, a foreign corporation, a foreign non-corporation or a foreign limited liability company authorized to transact business in Kentucky. The registered agent is the individual or business designated to receive service of process in the event the business is party to a legal action. The company seeking formation shall not act as its own registered agent.

CONSENT OF REGISTERED AGENT

Unless the registered agent signs the form, the business entity must deliver with the certificate of authority, the registered agent's consent to the appointment. The registered agent must give written consent to act as agent on behalf of the business entity. If the registered agent is a corporation an officer or the chairman of the board of directors must sign on behalf of the corporation. If the registered agent is a limited liability company and management of the company is vested in one or more managers, a manager must sign on behalf of the limited liability company. If management of the company is vested in its members, a member must sign. The person signing on behalf of the business entity acting as agent must designate the title or capacity in which he or she signs.

EFFECTIVE DATE AND TIME

The document will be effective on the date and time of filing, unless a delayed effective date and/or time is specified. A delayed effective date may not be later than the 90th day after the date of filing.

WHO MAY SIGN

The document must be signed by an officer, chairman of the board, member, manager, trustee or a partner.

NUMBER OF COPIES

If filing via mall or in person, one exact or conformed copy of the documents with the filing fee must be submitted to the address below. To make a copy of the filing for delivery to the local county clerk's office, visit www.sos.ky.gov and print a copy from the organization search tool.

A file stamped postcard will be sent to the principal office address. If the applicant wishes for the document to be sent to an alternate address other than the principal office, a request must be submitted in writing affirming that request. Alternate address requests must be submitted with each document filed with the Office of the Secretary of State.

The filing fee is \$90.00 for all business entity types. Checks should be made payable to the "Kentucky State Treasurer."

MAILING ADDRESS

Alison Lundergan Grimes Secretary of State P.O. Box 718 Frankfort, KY 40602-0718

OFFICE LOCATION

Room 154, Capitol Building 700 Capital Avenue Frankfort, KY 40601

Hours of Operation: 8:00 AM-4:30 PM ET

CONTACT INFORMATION AND NAME AVAILABILITY

If you have any questions, need additional forms or wish to search for name availability, please feel free to visit our website at www.sos.ky.gov or call (502) 564-3490.

FUTURE DOCUMENTATION REQUIREMENTS AND DEADLINES

The business entity must file an annual report with the Secretary of State between January 1 and June 30 of the year following the calendar year in which the corporation was formed. Subsequent annual reports must be filed with the Secretary of State between January 1 and June 30 of the following calendar years. A statement of change of the registered agent and/or registered office address or principal office address must be filed with the Secretary of State whenever a change has occurred involving any of the above categories. Downloadable forms may be found on our website.