

LLC-5

-FILED-

For Office Use Only

File No.: 202465017871 Date Filed: 12/17/2024

Must be submitted with a current Certificate of Good Standing issued by the government agency where the LLC was formed.

Filing Fee - \$70.00

Certified Copy Fee (Optional) - \$5.00

Note: Registered LLCs in California may have to pay minimum \$800 tax to the California Franchise Tax Board each year. For more information, go to

https://www.ftb.ca.gov/.			This Cuses Fa	. OEE - 1	u 0 -1	
10 LLC Name (Cale the secretary of the LLC of the days of the LLC of the	This Space For Office Use Only					y
1a. LLC Name (Enter the exact name of the LLC as listed on your attached	d Certificate of G	ood Standin	g.)			
CHENEGA GOVERNMENT N	MISSION SOI	LUTIONS,	LLC			
1b. California Alternate Name, If Required (Only enter an alternal	te name if the LL	C name in 1	a not available in	California.)	
LLC Jurisdiction (Ensure that the jurisdiction matches the attached (Certificate of Goo	od Standing.)			
a. Jurisdiction (State, foreign country or place where this LLC is formed.)						
Alas	ka					
b. Authority Statement (Do not alter Authority Statement)						
This LLC currently has powers and privileges to conduct busine	ess in the stat	te, foreign	country or plac	ce enter	ed in Ite	em 2a.
3. Business Addresses (Enter the complete business addresses. Iter	ms 3a and 3b ca	nnot be a P.	O. Box or "in care	of" an ind	ividual or	entity.)
a. Street Address of Principal Office - Do not enter a P.O. Box	City (no abbreviations)			State	Zip Code	
3000 C Street, Suite 301	Anchorage			AK	99503	
b. Street Address of Principal Office in California, if any - Do not enter a P.O. Box	City (no abbreviations)			State	Zip Code	
c. If the Mailing Address is the same as item 3a or 3b, check the applicable box:	√ 3a				<u>-</u>	
d. Mailing Address - if different than item 3a or 3b	City (no abbreviations)			State	Zip Code	
4. Service of Process (Must provide either Individual OR Corporation.)) }			<u> </u>	<u> </u>	
INDIVIDUAL - Complete Items 4a and 4b only. Must include agent's full r	name and Califor	nia street ad	fdress.			
a. California Agent's First Name (if agent is not a corporation)	Middle Name	Last Name				Suffix
b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box	a P.O. Box City (no abbreviation:		1	State	Zip Cod	J de
				CA		
CORPORATION - Complete Item 4c only. Only include the name of the r	egistered agent	Corporation.				
c. California Registered Corporate Agent's Name (if agent is a corporation) - Do not	complete Item 4a	or 4b				
Cogency G	lobal Inc.					
5. Read and Sign Below (Title not required.)						
By signing, I affirm under penalty of perjury that the information on behalf of the foreign LLC.	herein is true	and corre	ect and that I a	m authoi	rized to	sign
LETTE C1/ra/	Peter C. Nosek					
Signature V	Type ar	nd Print Na	ame			
LLC 6 (DEV/11/2022)				2023 Calif	fornia Secre	etary of St

LLC-5 (REV 11/2023)

bizfileOnline.sos.ca.gov

Alaska Entity #10171434

State of Alaska Department of Commerce, Community, and Economic Development Corporations, Business, and Professional Licensing

Certificate of Compliance

The undersigned, as Commissioner of Commerce, Community, and Economic Development of the State of Alaska, and custodian of corporation records for said state, hereby issues a Certificate of Compliance for:

Chenega Government Mission Solutions, LLC

This entity was formed on August 17, 2021 and is in good standing. This entity has filed all biennial reports and fees due at this time.

No information is available in this office on the financial condition, business activity or practices of this corporation.



IN TESTIMONY WHEREOF, I execute the certificate and affix the Great Seal of the State of Alaska effective October 17, 2024.

Julie Sande Commissioner