Filing and License Fee: \$310.00 minimum

4. The date of its incorporation is 09/20/2000

ID Number: 100 V

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STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
148 W. River Street
Providence, Rhode Island 02904-2615

BUSINESS CORPORATION

APPLICATION FOR CERTIFICATE OF AUTHORITY

Pursuent to the provisions of Section 7-1.2-1405 of the General Laws of Rhode Island, 1956, as amended, the undersigned corporation hereby applies for a Certificate of Authority to transact business in the State of Rhode Island, and for that purpose the following statement:	Albreign Albreits N
1. The name of the corporation is Sigmens Government Services, Inc.	
2. It is incorporated under the taws of Delaware	

3. The name, if different, which it elects to use in Rhode Island is:
(a) If the name of the corporation in its jurisdiction of incorporation does not contain the word "corporation," "company," "incorporated," or "limited," or an abbreviation thereof, then list the name of the corporation with the addition of one of the above corporate endings for use in Rhode Island:

(b) If the corporate name is not available in Rhode Island, then set forth below the fictitious name under which the corporation will qualify and transact business in Rhode Island as stated in the "Fictitious Business Name Statement" to be filed with this application:

5. The address of its principal office in the state or country under the laws of which it is incorporated is

attached

ser

_ and the period of its duration is Perpetual

Address

1881 Campus Commons Drive, Suite 103, Reston, Delaware, 20191	10.
6. The address of its proposed registered office in Rhode Island is 10 Wcybosact Street	120
(Street Address, pot P.O. Box)	7.5
Providence , RI 02903 and the name of its proposed registered agent in (City/Town) (Zip Code)	Rhode taland at
that address is CT Corporation System	
(Name of Agent)	
7. The purpose or purposes which it proposes to pursue in the transection of business in Rhode Island are:	
Building automation and security system upgrades.	
	
. (a) The names and respective addresses of its directors (optional unless directors are required under the laws of the	state or country
of which it is incorporated).	•

Form No. 150 Revised: 12/06

Director

Director Director Director

FILED

MAR 26 2007

RICOD - 09/25/96 CT Filter Manager Online

		Name.		Address
	President	See Attaches		•
	Vice President			
	T			
	Secretary			
				· · · · · · · · · · · · · · · · · · ·
3. TI aa	he aggregate number of shares nd series, if any, within a class,	which it has authority to issuits:	ie, itemized by classes, p	er value of shares, shares without par val
	Number of Shares	Class	Series	Par Value or Statement that Shares are without Par Value
_		Common	<u> </u>	\$1.50 pay val
). (a)	An estimate of the value of	of all property to be owned	by the corporation for	the following year, wherever located, is
(b)	An estimate of the value of	f the corporation's property	to be located within Ri	hode faland during the following year is
	following year, wherever local	g the following year beens to ted, is%.	the value of all property of (divide (b) by (a) and mu	tie of the property of the corporation to of the corporation to be owned during the thiply by 100 to obtain the percentage). Totalion during the following year is
(b)	An estimate of the gross a Island during the following year	mount of business to be tra	nsacted by the corporation	n at or from places of business in Rhode
(c)	be transacted by the corporati	of the company of the	ar the following are here	ount of business to be transacted by firs to the gross amount thereof which will be (b) by (a) and multiply by 100 to obtain
	the percentage).			
This	ин реговниде).	a certificate of Good Standi	ng issued by the proper o	filter of the state or country under the law
This of w	and percentage). application is accompanied by hich it is incorporated.	dhority shall be effortive un		,
This of w	and percentage). application is accompanied by hich it is incorporated. Application for Certificate of A	uthority shall be effective uponis filing Und exam	on filing unless a specifie er penalty of perjury nined this Application	d date is provided which shall be no tate 7. I declare and affirm that I hav for Certificate of Authority, includin
This of wi	e application is accompanied by hich it is incorporated. Application for Certificate of Ai the 90 th day after the date of t	uthority shall be effective uponis filing Und exam	er penalty of perjury mined this Application accompanying attac	d date is provided which shall be no later of the state or country under the law d date is provided which shall be no later of I declare and affirm that I hav for Certificate of Authority, including thments, and that all statement and affirm that

Directors

William Vinson Board Member 5560 E. Napoleon Ave Oak Park, CA 91377

H. Lowell Brown Proxy Holder / Board Member 291 Foreside Road Falmouth, ME 04105

Officers

David French
Sr. Vice President and Chief Financial Officer
1881 Campus Commons Drive, Suite 103
Reston, VA 20191

Dave Patterson Chief Operating Officer 1881 Campus Commons Drive, Suite 103 Reston, VA 20191

Liz Scott Chief Legal Counsel / Secretary 1881 Campus Commons Drive, Suite 103 Reston, VA 20191

Patricia Schneider Facilities Security Officer / Assistant Secretary 1881 Campus Commons Drive, Suite 103 Reston, VA 20191

PAGE 1

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SIEMENS GOVERNMENT SERVICES, INC."

IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTIETH DAY OF MARCH, A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

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

Harriet Smith Windsor Secretary of State

AUTHENTICATION: 5523180

DATE: 03-20-07

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