

State of Rhode Island Department of State - Business Services Division

RTCD RIDE BSD 141128 13 W1119121

Application for Certificate of Authority

FOREIGN Business Corporation

→ Filing Fee: \$310.00 minimum

Pursuant to the provisions of <u>RIGL 7-1,2-1405</u>, the undersigned foreign corporation hereby applies for a Certificate of Authority to transact business in the State of Rhode Island, and for that purpose submits the following statement:

1. The name of the corporation is:				
√2X, Inc.				
2. It is incorporated under the laws of: Indiana				
3. The name, if different, which it elects to use in Rho				
(a) If the name of the corporation in its jurisdiction of i "incorporated", or "limited," or an abbreviation thereof above corporate endings for use in Rhode Island:	incorporation does not contain f, then list the name of the cor	n the word "corporation", "company", poration with the addition of one of the		
(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:				
4. The date of its incorporation is: 2/4/2014				
And the period of its duration is: CHECK ONE BOX	ONLY			
X Perpetual (on-going)				
Date certain for dissolution				
5. The address of its principal office is:				
7901 JONES BRANCH, DR., SUITE 700, McLean, VA 2	22102			
6. The name and address of the initial registered age	ent/office in Rhode Island:			
Agent Name C T Corporation System				
Street Address (NOT a P.O. Box) 450 Veterans Memor	rial Parkway, Suite 7A			
City/Town East Providence	State RHODE ISLAND	Zip Code 02914		

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov 1:10

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3. (a) The names and restate or country of whic		tors (optional, unless dire	ectors are required under the laws of the
NAME		AD	DRESS
See Attached			
			
			Check the box to indicate an attachment X
8. (b) The names and r	espective addresses of its princ of which it is incorporated):	cipal officers (mandatory	if directors are not required under the laws
OFFICE	NAME		ADDRESS
PRESIDENT	Charles L. Prow	7901 JONES BR	ANCH, DR., SUITE 700, McLean, VA 22102
VICE PRESIDENT	Kevin T. Boyle	7901 JONES BR	ANCH, DR., SUITE 700, McLean, VA 22102
TREASURER	Michael J. Smith	7901 JONES BR	ANCH, DR., SUITE 700, McLean, VA 22102
SECRETARY	Kevin T. Boyle	7901 JONES BR	ANCH, DR., SUITE 700, McLean, VA 22102
	<u>_l, </u>		Check the box to indicate an attachment
9. The aggregate number par value, and series, i	ber of shares which it has authorif any, within a class, is:	ority to issue; itemized by	classes, par value of shares, shares withou
NUMBER OF SHARES	CLASS	SERIES	PAR VALUE OR STATE NO PAR VALUE
100,000,000	Common		\$0.01
10,000,000	Preferred		\$0.01
			_
located within this state	percentage, of the proportion the during the following year bear erever located. (Note: Percentage	's to the value of all prop	of the property of the corporation to be erty of the corporation to be owned during eet.)
0	%		
11. An estimate, as a	percentage of the proportion (the following year compa	usiness to be transacted by the corporation ared to the gross amount thereof which will

V2X, INC.

Name 🗧 😘 💮 📥	Title **	Address 🏝 😹 🕏
Cusumano, Dino M.	Director	7901 Jones Branch Dr, Suite 700,
		McLean, VA 22102
Elegba, Abbas O.	Director	7901 Jones Branch Dr. Suite 700,
Elegua, Auuas O.	Director	McLean, VA 22102
Evangelakos, Lee E.	Director	7901 Jones Branch Dr, Suite 700,
Evangelakos, Lee C.	Director	McLean, VA 22102
Howell, Mary L.	Chairman of the Board	7901 Jones Branch Dr. Suite 700.
1 1040011, 14kily E.		McLean, VA 22102
Parker, Melvin	Director	7901 Jones Branch Dr. Suite 700,
T BIRCI, WOITH		McLean, VA 22102
Pillmore, Eric M.	Director	7901 Jones Branch Dr. Suite 700.
i minore, ene in.		McLean, VA 22102
Prow, Charles L.	Director	7901 Jones Branch Dr, Suite 700,
Tow, Onlines 2.		McLean, VA 22102
Snyder, Neil D.	Director	7901 Jones Branch Dr, Suite 700,
i		McLean, VA 22102
Rotroff, Joel M.	Director	7901 Jones Branch Dr, Suite 700,
1,000,000,000,000		McLean, VA 22102
Waechter, Stephen L.	Director	7901 Jones Branch Dr. Suite 700,
Tracamon, Grapman 2.	_	McLean, VA 22102
Widman, Phillip C.	Director	7901 Jones Branch Dr, Suite 700,
I vitaniani, Finnip C.		McLean, VA 22102
Bjomson, Josephine F.	Senior Vice President and Chief Human	7901 Jones Branch Dr, Suite 700,
Djornson, vosuprimo i .	Resources Officer	McLean, VA 22102
Boyle, Kevin T	Senior Vice President, Chief Legal Officer,	7901 Jones Branch Dr, Suite 700,
[,,	General Counsel & Corporate Secretary	McLean, VA 22102
Chudamani, Chandra	Executive Director, Assistant Controller	7901 Jones Branch Dr, Suite 700,
		McLean, VA 22102
Elmore, Darren	Assistant Treasurer	7901 Jones Branch Dr, Suite 700,
		McLean, VA 22102
Frothingham, Cynthia	Vice President, Enterprise Projects	7901 Jones Branch Dr, Suite 700,
- "		McLean, VA 22102
Malakar, Sarita B.	Assistant Secretary	7901 Jones Branch Dr, Suite 700,
		McLean, VA 22102
Minton-Package, Corinne L.	Senior Vice President, Advanced	7901 Jones Branch Dr. Suite 700,
_	Technology	McLean, VA 22102
Noon, William B	Corporate Vice President and Chief	7901 Jones Branch Dr, Suite 700,
	Accounting Officer	McLean, VA 22102
Prow, Charles L.	President and Chief Executive Officer	7901 Jones Branch Dr, Suite 700,
		McLean, VA 22102
Shreves, Kenneth W.	Senior Vice President, Global Mission	7901 Jones Branch Dr. Suite 700,
	Training and Sustainment	McLean, VA 22102
Smith, Michael J	Corporate Vice President, Treasurer,	7901 Jones Branch Dr. Suite 700,
	Corporate Development and Investor	McLean, VA 22102
	Relations	7901 Jones Branch Dr, Suite 700,
Tekle, Zekarias	Executive Director, Global Tax	
		McLean, VA 22102

12. This application must be accompanied by a <u>Certificate of Good Standing/Letter of Status</u> from the state or country of formation dated within 60 days of the date of this filing.			
13. Date when the Certificate of Authority will be effective: CHEC	CK ONE BOX ONLY		
X Date received (Upon filing)			
Later effective date (Date must be no more than 90 days from the date of filing)			
14. Under penalty of perjury, I declare and affirm that I have exa any accompanying attachments, and that all statements contain	mined this Application for Certificate of Authority, including led herein are true and correct.		
Type or Print Name of Authorized Officer	Date		
Kevin T. Boyle	3/13/2024		
Signature of Authorized Officer of the Corporation			

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State of Indiana Office of the Secretary of State

CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greeting:

To writing these tresents come, erecting.	
I, DIEGO MORALES, Secretary of State of India	na, do hereby certify that I am, by virtue of the laws of
the State of Indiana, the custodian of the co	rporate records and the proper official to execute this
certificate.	W A
I further certify that records of this office discl	ose, that
	2X INC
duly filed the requisite documents to comme	ence business activities under the laws of the State of
Indiana on February 04, 2014, and was in exis	stence or authorized to transact business in the State of
Indiana on March 14, 2024.	
I further certify this Domestic For-Profit Co.	poration has filed its most recent report required by
Indiana law with the Secretary of State, or is r	not yet required to file such report, and that no notice of
withdrawal, dissolution, or expiration has be	een filed or taken place. All fees, taxes, interest, and
penalties owed to Indiana by the domestic of	or foreign entity and collected by the Secretary of State
have been paid.	
STATE O	In Witness Whereof, I have caused to be affixed my
	signature and the seal of the State of Indiana, at the City
0	of Indianapolis, March 14, 2024
-	
	Diego Morales
IAIG	DIEGO MORALES
	SECRETARY OF STATE

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All certificates should be validated here: https://bsd.sos.in.gov/ValidateCertificate Expires on April 13, 2024.