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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

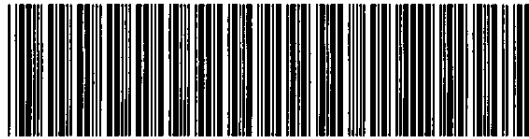
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

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C.S. 4-25

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: NACCB Services, Inc.
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

June Wagner

(Name of Person)

NACCB Services, Inc.

(Firm/Company)

1420 King Street, Suite 610

(Address)

Alexandria, VA 22314

(City/State and Zip code)

For further information concerning this matter, please call:

June Wagner at (703) 838-2050 x101
(Name of Person) (Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

- \$70.00 Filing Fee
- \$78.75 Filing Fee & Certificate of Status
- \$78.75 Filing Fee & Certified Copy
- \$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. NACCB SERVICES, INC.
(Enter name of corporation: must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

TechSERVE
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. WASHINGTON D.C. 3. 20-1201414
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. MAY 7, 2004 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. NONE
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 1420 King Street suite 610 ALEXANDRIA VA 22314
(Principal office address)

1420 King Street suite 610 ALEXANDRIA VA 22314
(Current mailing address)

TO ESTABLISH, support and maintain programs that address the needs of the IT services industry which includes insurance and other lawful purposes.
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

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

Name: NRAI SERVICES, INC.

Office Address: 2731 Executive PARK DR. suite 7
WESTON, Florida 33331
(City) (Zip code)

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TALLAHASSEE, FLORIDA

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation 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: Xonda Diven, Asst. Secretary 4-12-07
(Registered agent's signature)
Xonda Diven, Assist. Secretary

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

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TALLAHASSEE, FLORIDA

A. DIRECTORS

Chairman: /Director - Mark Granger
Address: 1420 King Street, Suite 610
Alexandria, VA 22314

Vice Chairman: _____
Address: _____

Director: * SEE ATTACHED LIST OF DIRECTORS
Address: _____

Director: _____
Address: _____

B. OFFICERS

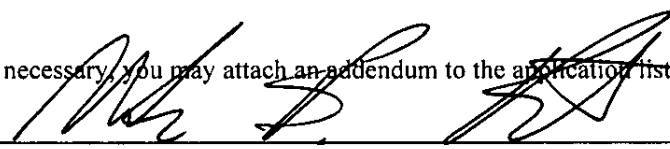
President: /Director - Tom Whiting
Address: 1420 King Street, Suite 610
Alexandria, VA 22314

Vice President: _____
Address: _____

Secretary: /Treasurer/Director - Chris Cosmos
Address: 1420 King Street, Suite 610 Alexandria, VA 22314

~~Treasurer~~ Asst. Secretary/Director - Mark Roberts
Address: 1420 King Street, Suite 610 Alexandria, VA 22314

* NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 
(Signature of Director or Officer listed in number 12 of the application)

14. Mark Roberts, Asst. Sec. + Director
(Typed or printed name and capacity of person signing application)

FullName	Officer/Director	Address 1	Address 2	City	State	Zip
Ken Halford	Director	1420 King St.	Ste. 610	Alexandria	VA	22314
Stephen Fazen	Director	1420 King St.	Ste. 610	Alexandria	VA	22314
Steve Bryant	Director	1420 King St.	Ste. 610	Alexandria	VA	22314
Barbara Martin	Director	1420 King St.	Ste. 610	Alexandria	VA	22314
Stan Soldz	Director	1420 King St.	Ste. 610	Alexandria	VA	22314
Tony Wolz	Director	1420 King St.	Ste. 610	Alexandria	VA	22314
John Dreyer	Director	1420 King St.	Ste. 610	Alexandria	VA	22314
Karen Wilson	Director	1420 King St.	Ste. 610	Alexandria	VA	22314
Max Horn	Director	1420 King St.	Ste. 610	Alexandria	VA	22314
Lynn Leader	Director	1420 King St.	Ste. 610	Alexandria	VA	22314
Doug Mathias	Director	1420 King St.	Ste. 610	Alexandria	VA	22314
Greg Corson	Director	1420 King St.	Ste. 610	Alexandria	VA	22314
Ron Zander	Director	1420 King St.	Ste. 610	Alexandria	VA	22314
Jonathan Gazdak	Director	1420 King St.	Ste. 610	Alexandria	VA	22314
Seritta Krafnick	Director	1420 King St.	Ste. 610	Alexandria	VA	22314
Evan R. Falcone	Director	1420 King St.	Ste. 610	Alexandria	VA	22314
Phyllis Adams	Director	1420 King St.	Ste. 610	Alexandria	VA	22314
Paul Versaggi	Director	1420 King St.	Ste. 610	Alexandria	VA	22314
Carole Schlocker	Director	1420 King St.	Ste. 610	Alexandria	VA	22314
Steve Norris	Director	1420 King St.	Ste. 610	Alexandria	VA	22314

GOVERNMENT OF THE DISTRICT OF COLUMBIA
DEPARTMENT OF CONSUMER AND REGULATORY AFFAIRS




C E R T I F I C A T E

THIS IS TO CERTIFY that there were received and accepted for record in the Department of Consumer and Regulatory Affairs, Corporations Division, on the 7th day of **May , 2004** *Articles of Incorporation of:*

NACCB SERVICES, INC.

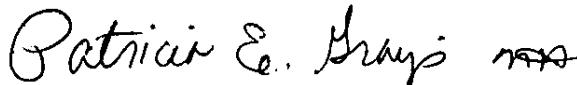
WE FURTHER CERTIFY that the above named corporation is in **Good Standing** and duly incorporated and existing according to the records of Corporations Division, having filed all reports as required by the District of Columbia Business Corporation Act.

IN TESTIMONY WHEREOF I have hereunto set my hand and caused the seal of this office to be affixed this **23rd** day of **February , 2007 .**



LISA M. MORGAN
Interim Director

Business and Professional Licensing Administration



PATRICIA E. GRAYS
Superintendent of Corporations
Corporations Division

Adrian M. Fenty
Mayor