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COVER LETTER

то:	Registration Secti Division of Corpo					
		USA Military Di	vision, Inc.			
SUBJ	IECT:					
		Name o	f corporation	- must include suffix		
Dear 8	Sir or Madam:					
"Certi		`or "Certificate	of Good Stan	Authorization to Trans ding" and check are si ss in Florida.		
	return all correspoi nen Hodgins	idence concerni	ng this matter	to the following:		
Wall V	Vorks USA Military (Division, Inc.	Name of	Person		
401 P	rince Georges Blvd.	, Suite E	Firm/Com	pany		
Upper	Marlboro, Maryland	i, 20774	Addre	·\$\$		
shodg	ins@wallworksusa.	com	City/State ar	nd Zip code		
	•	E-mail address	(to be used f	or future annual repor	t notification)	-
For fu	rther information co	oncerning this m	atter, please c	all:		SECRIT
Steph	en Hodgins		410 at (212-0266		等 第 2 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
	Name of Person		Area Code	Daytime Tele	phone Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			
Enclos	sed is a check for the	e following amo	unt:			
□ \$70	0.00 Filing Fee (■ \$78.75 Filing Certificate o		\$78.75 Filing Fee & Certified Copy	□ \$87.50 F Certific Certific	ate of Status &

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.
Wall Works USA Military Division, Inc.

1.				
	orporation; must include "INCORPORATED," "Corp," "Inc," "Co," or "Corp.")	COMPANY," "CORPORATION,"		
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business Maryland 20-3105710 2.				
	y under the law of which it is incorporated)	(FEI number, if appli	cable)	
4	5. <u></u> _ 5. <u></u>			
(Date None	of incorporation)	(Date of duration, if other than perpetual)		
5.				
	(Principal c	office address)		
	(Current mailing a	ddress, if different)		
3. Name and stree	t address of Florida registered agent: (P.O. E	Box NOT acceptable)	್ಷಣ ನ	
Name:	REGISTERED AGENTS INC.	_		
Office Address:	3030 N. Rocky Point Drive, STE 150	<u>A</u>	1000 21	
	TAMPA	_ , Florida		
	(City)	(Zip code)		
9. Registered age	nt's acceptance:		電話 蒿	

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.

Bill Havre/Secretary/Registered Agents Inc.

(Registered agent's signature)

10. 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.

11. Names and business addresses of officers and/or directors: A. DIRECTORS Stephen Hodgins Chairman: 869 Childs Point Road, Annapolis, MD 21401 Address: _ Vice Chairman: Address: ____ Director: Address: ____ **B. OFFICERS** Stephen Hodgins President: 869 Childs Point Road, Annapolis, MD 21401 Address: Vice President: Secretary: __ Address: ___ Treasurer: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. Stephen Hodgins, President

13. _____

STATE OF MARYLAND Department of Assessments and Taxation

I. MICHAEL L. HIGGS OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO THE FORFEITURE OR SUSPENSION OF CORPORATIONS, OR THE RIGHTS OF CORPORATIONS TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT WALL WORKS USA MILITARY DIVISION, INC., INCORPORATED JUNE 29, 2005, IS A CORPORATION DULY INCORPORATED AND EXISTING UNDER AND BY VIRTUE OF THE LAWS OF MARYLAND AND THE CORPORATION HAS FILED ALL ANNUAL REPORTS REQUIRED, HAS NO OUTSTANDING LATE FILING PENALTIES ON THOSE REPORTS, AND HAS A RESIDENT AGENT. THEREFORE, THE CORPORATION IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING WITH THIS DEPARTMENT AND DULY AUTHORIZED TO EXERCISE ALL THE POWERS RECITED IN ITS CHARTER OR CERTIFICATE OF INCORPORATION, AND TO TRANSACT BUSINESS IN MARYLAND.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS DECEMBER 12, 2016.

Michael L. Higgs

Deputy Director



301 West Preston Street, Baltimore, Maryland 21201 Telephone Balto. Metro (410) 767-1340 / Outside Balto. Metro (888) 246-5941 MRS (Maryland Relay Service) (800) 735-2258 TT/Voice Fax (410) 333-7097

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