# M1500006325

(Re	questor's Name)				
(Ad	dress)				
(Ad	dress)				
(Cit	ry/State/Zip/Phone	÷#)			
PICK-UP	☐ WAIT	MAIL			
(Bu	siness Entity Nan	ne)			
(Document Number)					
Certified Copies	_ Certificates	of Status			
Special Instructions to Filing Officer:					

Office Use Only



600274849836



07/13/15--01023--007 \*\*130.00

15 JUNUSO PH 4: 35

AUG 1 0 2015 Y SULKER

W15-47867

#### **COVER LETTER**

TO:		stration Section ' sion of Corporation	s				
SUBJI		Cummings Creek De	-				
SODJI	ECI; _		Name of I	Limited Liability C	lompany		
			eign Limited Liability Comp I to register the above refere				
Please	return a	all correspondence co	oncerning this matter to the	following:			
		Kathy Lash					
		<del></del>	N	ame of Person			•
	Cummings Creek Development, LLC						
Firm/Company							
	606 A North Talbot Street, Suite 303						
			······································	Address			•
		St. Michaels, M	aryland 21663				
		<del>-</del>	City/S	tate and Zip Code			-
		lashkath@goeaste	on.net				
			E-mail address: (to be used	d for future annual	report not	ification)	-
For fu	rther inf	ormation concerning	this matter, please call:				
	Doug	glas Collison		410 at (	822-390	00	
		Name o	f Contact Person	Area Code	Day	time Telephone Number	<del>.</del>
	Divis Regis P.O.	LING ADDRESS: sion of Corporations stration Section Box 6327 shassee, FL 32314			Division of Registrati Clifton B 2661 Exe	CADDRESS: of Corporations ion Section uilding cutive Center Circle ee, FL 32301	
Enclos		check for the following 25.00 Filing Fee	ng amount:  \$\Boxed{\Boxes} \$\\$130.00 \text{ Filing Fee & Certificate of Status}\$	□ \$155.00 Filin Certified Copy	ig Fee &	□ \$160.00 Filing Fee. Cof Status & Certified Co	



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

15 JUL 30 PM 2: 50

SECRETARY UP STATE
TALLAHASSEE, FLORIDA

July 16, 2015

KATHY LASH 606 A NORTH TALBOT STREET, SUITE 303 ST MICHAELS, MD 21663 US

SUBJECT: CUMMINGS CREEK DEVELOPMENT, LLC

Ref. Number: W15000047867

We have received your document for CUMMINGS CREEK DEVELOPMENT, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), AuthorizedPerson (AP), or Authorized Representative (AR).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yasemin Y Sulker Regulatory Specialist II

Letter Number: 115A00014990

www.sunbiz.org

apalogue -Thank you! Kathy Loch

### APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPLANTO TRANSACT RUSINESS. IN THE STATE OF FLORIDA:

Cummings Creek Deve	elopment, LLC		
(Name of Fore	eign Limited Liability Company; must in	nclude "Limited Liability Company," "L.L.C.," or	·LLC.")
f name unavailable, enter al iability Company," "L.L.C,"		f transacting business in Florida. The alternate nam	e must include "Limited
Maryland		3. 20-8273142	
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicable)	
April 30, 2015			
	(See sections 605.0904 & 605.090	in Florida, if prior to registration.) 05, F.S. to determine penalty liability)	
1218 Pearl Street			-
Key West, Florida 330-			
	(Street Address of Prin	ncipal Office)	-
1218 Pearl Street			=
Key West, Florida 330	40		35 0
	(Mailing Add	dress)	
. Name and street addres	is of Florida registered agent: (P.O.	Box NOT acceptable)	AHASS.
Name:	Gregory S. Oropeza, Esquire		Marketing and Company
Office Address:	138-142 Simonton Street		ma 2 11
	Key West	Florida 33040 (Zip code)	FLOR
Registered agent's accep		(Zip code)	- J
is application, I hereby dith the provisions of all s	acce pt the appointment as registere	e of process for the above stated corporation ed agent and agree to act in this capacity. If complete performance of my duties, and I am	urther agree to comply
	(Registere	d agent's signature)	•
	icity and address of the person(s) where RIZED MEMBER.	ho has/have authority to manage is/are:	
06 A North Talbot Street	(		
St. Michaels, Maryland 21	1663		
. Attached is a certificate prisdiction under the law of the translator must be su	of which it is organized. (If the certi	old, duly authenticated by the official having officate is in a foreign language, a translation of	custody of records in the the certificate under oath
	n 605.0203, F.S., the execution of the true. I am aware that any false inform	his document constitutes an affirmation under to mation submitted in a document to the Department to t	

Typed or printed name of signee

## STATE OF MARYLAND Department of Assessments and Taxation

I, PAUL B. ANDERSON 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 LIMITED LIABILITY COMPANIES, OR THE RIGHTS OF LIMITED LIABILITY COMPANIES TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT CUMMINGS CREEK DEVELOPMENT, LLC, REGISTERED JANUARY 11, 2007, IS A LIMITED LIABILITY COMPANY EXISTING UNDER AND BY VIRTUE OF THE LAWS OF THE STATE OF MARYLAND, AND THAT THE LIMITED LIABILITY COMPANY IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING TO TRANSACT BUSINESS.

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 JUNE 22, 2015.

Paul B. Anderson Charter Division

ON THE PROPERTY OF THE PROPERT

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