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| (R | equestor's Name) | |
|-------------------------|------------------------|--------|
| | · | |
| (A | ddress) | |
| | | |
| (A | ddress) | |
| | | |
| (C | ity/State/Zip/Phone #) |) |
| PICK-UP | ☐ WAIT | MAIL |
| · (B | usiness Entity Name) | |
| ,- | , | |
| (D | ocument Number) | |
| | | |
| Certified Copies | Certificates of | Status |
| | | |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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12/18/07--01002--006 **70.00







| ACCOUNT NO. : 072100000032 | | | | |
|---|--|--|--|--|
| REFERENCE : 361833 7504028 | | | | |
| AUTHORIZATION : | | | | |
| COST LIMIT : \$ PPD | | | | |
| ORDER DATE : December 14, 2007 | | | | |
| ORDER TIME : 10:37 AM | | | | |
| ORDER NO. : 361833-010 | | | | |
| CUSTOMER NO: 7504028 | | | | |
| FOREIGN FILINGS NAME: PENNIMAN & BROWNE, INC. | | | | |
| XXXX QUALIFICATION (TYPE: CO) | | | | |
| PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: | | | | |
| CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING | | | | |
| CONTACT PERSON: Kimberly Moret EXT# 2949 | | | | |
| EXAMINER: | | | | |

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.

| • • ———— | an & Browne, Inc. orporation; must include "INCORPORATI | <u> </u> | " "COMPANIV " "COPPOPATION!" | |
|-------------------|--|---------------|--|-------------------------|
| | orp." "Inc," "Co," or "Corp.") | cυ, | COMPANT, CORPORATION, | |
| , | • | | | |
| | | | | |
| (If name unavaila | able in Florida, enter alternate corporate na | me | adopted for the purpose of transacting b | ousiness in Florida) |
| Maryla | nd | 2 | 52-0566417 | |
| (State or country | nd under the law of which it is incorporated) | ٥, | (FEI number, if applica | able) |
| | | _ | Perpetual | |
| · | of incorporation) | Э. | (Duration: Year corp. will cease to ex | cist or "perpetual") |
| | , | | • | |
| • | (Date first transacted busine | ss ir | Florida, if prior to registration) | |
| | | | 02, F.S., to determine penalty liability) | |
| 6252 F | alls Road, Baltimore, M | ID_ | 21209 | |
| | (Principal office | addı | ress) | |
| Same a | s above. | | | |
| | (Current mailing | add | ress) | |
| | | | | |
| '· —— | ipe tapping services. | | | |
| (Purpose(s |) of corporation authorized in home state o | r co | untry to be carried out in state of Floric | 1a) |
| . Name and stree | <u>et address</u> of Florida registered agent: (| P.C | . Box <u>NOT</u> acceptable) | 3. 0 |
| Name: | Corporation Service Compan | y | | AFEC T |
| | 1201 Hays Street | | | 程 8 |
| Office Address: | | | | 55 = |
| | Tallahassee | | Florida 32301 | He - T |
| | (City) | | (Zip code) | 0F 3T |
| 0. Registered as | gent's acceptance: | | | 28 |
| laving been nam | ed as registered agent and to accept se | | | orporation at the place |
| | application, I hereby accept the appoi omply with the provisions of all statute | | | |
| | with and accept the obligations of my | | | rerjormance of my au |
| • | | - | - ~ | |
| C | orporation Service Company | ı | Kimberty B. Moret | |
| <u> </u> | By: Myland W | \mathcal{U} | as its agent | _ |
| | (Registered agent's signati | ire) | | |

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:

| A. | DI | R | E | C1 | ľO | RS |
|----------|--------------------|----|---|----|-----|-----|
| <i>^</i> | $\boldsymbol{\nu}$ | л. | | u | . • | 110 |

| Chairman: | Linda Penniman |
|------------|---|
| Address: | 611 Portside, Naples, FL 34103 |
| _ | |
| Vice Chair | man: Director: George Barker |
| Address: | 10313 Wilde Lake Terr., Columbia, MD 21044 |
| _ | |
| Director: | Rebecca Penniman, Louis Wittenberg |
| Address: | 6252 Falls Road, Baltimore, MD 21209 |
| - | |
| Director: | Nick Penniman |
| Address: | 611 Portside, Naples, FL 34103 |
| | |
| B. OFFI | CERS |
| President: | Rebecca Penniman |
| Address: | 6252 Falls Road, Baltimore, MD 21209 |
| | |
| Vice Presi | dent: Louis Wittenberg, Tom Simon, Barb Schroyer |
| Address: | 6252 Falls Road, Baltimore, MD 21209 |
| | |
| Secretary: | Nick Penniman |
| Address: | 611 Portside, Naples, FL 34103 |
| Treasurer: | Bernard VanBergen |
| Address: | 6252 Falls Road, Baltimore, MD 21209 |
| | |
| NOTE: | Ifine essary, 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) |
| 1.4 | Rebecca Penniman - President |
| 14 | (Typed or printed name and capacity of person signing application) |

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 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 PENNIMAN & BROWNE, INC. 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 NOVEMBER 27, 2007.

Paul B. Anderson Charter Division

Faul B. Under

ALCARIASSEE, FLORIDA



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