FBCCCCO/

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	e)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
·		

Office Use Only



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06/06/13--01014--023 **87.50

SECRETARY OF STAFF BIVISION OF CORCURATIONS

1.01.0



FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED
13 JUN 18 AM 10: 49

DEPARTMENT OF STATE DIVISION OF CORPORATIONS TALLAHASSEE, FLORIDA

June 7, 2013 rec'd 6/14/13; mailed back 6/14/13

MORRIS L GARTEN FEDDER AND GARTEN PROFESSIONAL ASSOC. 36 S CHARLES ST, SUITE 2300 BALTIMORE, MD 21201-3177

SUBJECT: J.S. PLANK AND D.M. DICARLO FAMILY FOUNDATION, INC. Ref. Number: W13000033232

We have received your document for J.S. PLANK AND D.M. DICARLO FAMILY FOUNDATION, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

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) 245-6052.

Pamela Smith Regulatory Specialist II

Letter Number: 413A00014373

COVER LETTER

TO: New Filing Section Division of Corporations

SUBJECT: J	S. Plank	and D.M. DiCar	lo Family	Foundation,	Inc.
		Name of Corporat	ion – must in	clude suffix	
Dear Sir or Mada	un:				
Affairs in Florida	", "Certificat	Foreign Not for Prof te of Existence", or "e not for profit corpora	Certificate of	Status" and che	ck are submitted to
Please return all	corresponden	ice concerning this m	atter to the fo	ollowing:	
_	Morris L.				
		Name (of Person		
_	Fedder ar	nd Garten Profes	ssional As Company	ssociation	
	36 S Cha	ırles Street, Sı	• •		
_	50 5. One	Tics bileet, bu			
_		Ac	ldress		
	Poltdmore	e, Maryland 2120			
-	Dartimore		and Zip Code	<u> </u>	
		@fedgar.com dress: (to be used for	f.a.a.a.a.a.a.a.a.	1 variant natitions	NAT.)
	E-man ad	mess: (to be used for	Tuttue amina	i report notificat	non)
For further inform	mation conce	rning this matter, ple	ase call:		
Vickie Hil		at	(410)	539-2800	ephone Number
1	Vame of Pers	OII	Area Code	& Daytime Tel	ephone Number
New Fili Division P.O. Box	ng ADDRES ng Section of Corporati 6 6327 see, FL 3231	ons		New Filing Sec Division of Co Clifton Buildin	rporations ig e Center Circle
Enclosed is a che	ck for the fo	llowing amount:			,
□ \$70.00 Filing		78.75 Filing Fee & Certificate of Status		Filing Fee & ed Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

2. Maryland	ry under the law of which it is inco	3. 71–1040599 orporated) (FEI number, if applicable)	<u>.</u>	
4. <u>October 3</u>	0, 2007	5. Perpetual (Duration: Year corp. will cease to exist or "perpet	- 105	
(Da	te of Incorporation)	(Duration: Year corp. will cease to exist or "perpet	tual")	
6.				
(Date first conduc	ted affairs in Florida if prior to regi	istration. See sections 617.1501 & 617.1502, F.S, to determine pena	lry liabilu	ty.)
7 36 S. Cha	rles Street, Suite 230	00, Baltimore, Maryland 21201-3177		
··		(Principal office address)		
26 0 05-	1	00 B-164 W1 01001 0177		
36 S. Cha	ries Street, Suite 230	00, Baltimore, Maryland 21201-3177 (Current mailing address)		
		(Current maining address)		
8. Charitabl	e purposes			
(Purpose(s) of co	rporation authorized in home state	e or country to be carried out in the state of Florida)		
				00
0.37	. 13 (279) 3.1 (1.4	Language (D.O. Dan NOT annuntable)	C.J	
9. Name and stree	et address of Florida registered	l agent: (P.O. Box NOT acceptable)	<u>`</u>	751 735(
9. Name and <u>stre</u>	et address of Florida registered	l agent: (P.O. Box <u>NOT</u> acceptable)	3 JUN	SECRE /ISION
9. Name and <u>stree</u> Name: _	t address of Florida registered James Bruce Neill	l agent: (P.O. Box NOT acceptable)	3 JUN 18	SECRETAI ASSON OF
	James Bruce Neill	l agent: (P.O. Box <u>NOT</u> acceptable)	3 JUN 18 F	SLORE TARY VISION OF CO
Name: _		l agent: (P.O. Box <u>NOT</u> acceptable)	丑	SECRETARY OF /ISION OF CORRE
Name: _	James Bruce Neill	l agent: (P.O. Box <u>NOT</u> acceptable)	丑	SECRETARY OF STA ASSON OF CORPUSA ASSOCIATION
Name: _	James Bruce Neill 9440 Cotten Court Sanibel	 Florida 33957	丑	SECRETARY OF STATE Alsion of coreoratio
Name: _	James Bruce Neill 9440 Cotten Court			AFOUR OF CORPORATIONS OF STATE
Name: _ Office Address: _	James Bruce Neill 9440 Cotten Court Sanibel (City)	 Florida 33957	丑	ESECRETARY OF STATE AISSON OF CORPURATIONS
Name: _ Office Address: 10. Registered	James Bruce Neill 9440 Cotten Court Sanibel (City)	, Florida <u>33957</u> (Zip Code)	PH 9: 44	
Name: _ Office Address: 10. Registered Huving been named assignment of the	James Bruce Neill 9440 Cotten Court Sanibel (City) agent's acceptance: med as registered agent and to	, Florida 33957 (Zip Code) accept service of process for the above stated corporation the appointment as registered agent and agree to act in the	PH 99	olace city. I
Name: _ Office Address: 10. Registered Having been nan designated in thi further agree to	James Bruce Neill 9440 Cotten Court Sanibel (City) agent's acceptance: med as registered agent and to s application, I hereby accept	, Florida 33957 (Zip Code) accept service of process for the above stated corporation	PH 99	olace city. I

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.

(Registered agent's signature)

12. Names and addresses of officers and/or directors

A. DIRECTORS
Chairman:
Address:
Vice Chairman:
Address:
Director:
Address:
Director:
Address:
B. OFFICERS
President: J. Scott Plank
Address 36 S. Charles Street, Suite 2300, Baltimore, Maryland 21201-3177
Vice President: Dana M. DiCarlo
Address: 36 S. Charles Street, Suite 2300, Baltimore, Maryland 21201-3177
Secretary: Morris L. Garten
Address: 36 S. Charles Street, Suite 2300, Baltimore, Maryland 21201-3177
Treasurer:
Address:
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
13. Men & Hack, Secretary (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
14. Mours 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 J.S. PLANK AND D.M. DICARLO FAMILY FOUNDATION, INC., INCORPORATED OCTOBER 30, 2007, 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 MAY 15, 2013.

Paul B. Andrew

Paul B. Anderson Charter Administrator



3 JUN 18 8H 9: 44

SHORETANY OF STATE

301 West Preston Street, Baltimore, Maryland 21201
Telephone Balto. Metro (410) 767-1344 / Outside Balto. Metro (888) 246-5941
MRS (Maryland Relay Service) (800) 735-2258 TT/Voice
Fax (410) 333-7097

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