# F15000004339

(Requestor's Name)
,
(Address)
(Address)
(0:1.10) - 1.77 - (1) 40
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
•

Office Use Only



600277601276

2015 SEP 30 AM 10: 51

2015 SEP 30 A 10: 13
SECRETARY OF STATE
ALL AHASSEF, FLORIDA

OCT 0 1 20.5 ). BRISCE CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE: 802775 8066351

AUTHORIZATION : Sixual

COST LIMIT : 4/\28.75

ORDER DATE: September 29, 2015

ORDER TIME: 1:32 PM

ORDER NO. : 802775-005

CUSTOMER NO: 8066351

\_\_\_\_\_\_

#### FOREIGN FILINGS

				.I.171	č
XXXX	QUALIFICATION	(TVDF)	CO)	KSS ASS	را
MANA	QUALIFICATION	(1176.	<u>co</u> )		$\subseteq$

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

NAME: ATTELOIR, INC.

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER:

#### **COVER LETTER**

	tration Sec								
	Atteloir, l								
SUBJECT:		Name o	Corporatio	n - must i	nclude suffix	·	<u> </u>		_
Dear Sir or M	adam:								
"Certificate of	f Existence	on by Foreign Cor ," or "Certificate of a corporation to tra	of Good Sta	ınding" aı	od check are su				
Please return : Kathlyo Adam		ondence concernin	g this matte	er to the f	ollowing:				
			Name of	Person			<del></del>		_
Atteloir, Inc.									
5520 Research	Park Drive	Ste 250	Firm/Cor	npany	- Andrew Control of the Control of t			<b>,</b>	_
	· · · · · · · · · · · · · · · · · · ·		Add	ress					_
Catonsville, M	D 21228								_
kseay@ancloir	zom		City/State a	and Zip co	ode		_		
	<del></del>	E-mail address:	(to be used	for future	annual report	notification	m <del>Z</del> g	2015	-
For further inf	ormation c	oncerning this ma	tter, please	call:			CRET	43S f	7
Christi Turner		,,	443 t (	543-5	289		ARY SSE	30	
Name	of Person		Area Coo	Je	Daytime Telep	obone Nun	NON PART	D:	
Regist Divisio Cliftor 2661 l	ration Section of Corp a Building	orations Center Circle			MAILING A Registration 5 Division of C P.O. Box 632 Tallahassee, 1	Section Corporation 17		3	
Enclosed is a c	beck for the	ne following amou	:1מ						
□ \$70.00 Fift	ng Fee	S78.75 Filing 1 Certificate of			Filing Fee & ed Copy	Cer	.50 Filing tificate o tified Co	f 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.

Atteloir, Inc.		_		
	orporation; must include "INCORPORATED," forp," "Inc." "Co," or "Corp.")	"COMPANY," "CORPORATIO	N,"	•
	able in Florida, enter alternate corporate name ac	• •	ing business in Florida)	-
2. MD		32-1687725		
(State or countr 03/08/1990 4.	y under the law of which it is incorporated)  5.	(FEI number, if applicable)  (Date of duration, if other than perpetual)		
(Date	of incorporation)			
5520 Research Pi	(Date first transacted business in I (SEE SECTIONS 607.1501 & 607.150 ark Drive Ste 250 Catonsville, MD 21228	2, F.S., to determine penalty fiabi	lity)	•
/	ark Drive Ste 250 Catonsville, MD 21228 (Principal	office address)		
washing one manage agency and the second		address, if different)	√ - a <del>(not 100 m) (not 100 m</del>	,
	(Current manning	admicss, it differently	<b>-</b>	
	et address of Florida registered agent: (P.O. Ross Seay	Box NOT acceptable)	2015 SEP SECKET ALLAHA	1
Name: Office Address:	1881 79th St Cswy Ste 1005	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	30 ARY:	
	Northbay Village	33141 , Florida	A D	J
	(City)	(Zip code)		
designated in this further agree to co	ent's acceptance:  ed as registered agent and to accept service application, I hereby accept the appointme omply with the provisions of all statutes rel amiliar with and accept the obligations of t	ent as registered agent and ag ative to the proper and compl	ed corporation at the ree to act in this capa lete performance of m	city. I
·	(Registered as	ent'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 Chairman: Address: Vice Chairman: Address: \_\_ Director: \_ Address: Address: \_ **B. OFFICERS** Kathlyn Seay President: 1570 Shoreline Way Address: Hollywood, FL 33019 Vice President: Address: Kathlyn Seay 11 Secretary: 1570 Shoreline Way, Hollywood, FL 33019 ប៊ែក Address: \_ Kathlyn Scay Treasurer. 1570 Shoreline Way Hollywood, FL 33019 Address: NOTE: If necessary, you may attack 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

(Typed or printed name and capacity of person signing application)

a third degree felony as provided for in s.817,155, F.S.

1220021

Kathlyn Seay

## STATE OF MARYLAND Department of Assessments and Taxation

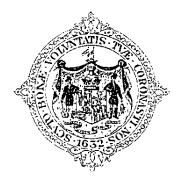
I, PAUL B. ANDERSON OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO THE FORFEITURE OR SUSPENSION OF CORPORATIONS, OR THE RIGHTS OF CORPORATIONS TO TRANSACT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

I FURTHER CERTIFY THAT ATTELOIR, INC., INCORPORATED MARCH 08, 1990, 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 SEPTEMBER 29, 2015.

Paul B. Anderson Charter Division

Paul B. Under



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

crblnk

R0009830389