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2016 MAY -2 P 1:11
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

MAY 04 2016

S MASON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Enterprise Community Asset Management, Inc.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Melissa Slayton

Name of Person

Enterprise Community Investment, Inc.

Firm/Company

11000 Broken Land Parkway, Suite 700

Address

Columbia, MD 21044

City/State and Zip code

mslayton@enterprisecommunity.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Melissa Slayton

410 772-2488
at ()

Name of Person

Area Code

Daytime Telephone 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

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☒ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

**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.*

Enterprise Community Asset Management, Inc.

1. _____
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Maryland 3. 90-0863384
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 06/26/2012 5. perpetual
(Date of incorporation) (Date of duration, if other than perpetual)

6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 11000 Broken Land Parkway, Suite 700, Columbia, MD 21044
(Principal office address)

(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324
(City) (Zip code)

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9. Registered agent's acceptance:

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.



**Judith Argeo
Vice President
and Assistant Secretary**

(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

SEE ATTACHED ADDENDUM

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

SEE ATTACHED ADDENDUM

President: _____

Address: _____

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. Bruce Rothschild _____

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.

13. Bruce Rothschild, Vice President _____

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

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TALLAHASSEE, FLORIDA

**ADDENDUM TO APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO
TRANSACTION BUSINESS IN FLORIDA**

11. Name and business addresses of officers and/or directors:

A. Directors

Chairman: Charles Werhane

Address: 11000 Broken Land Parkway, Suite 700, Columbia, MD 21044

Director: Sally Hebner

Address: 11000 Broken Land Parkway, Suite 700, Columbia, MD 21044

Director: Elizabeth O'Leary

Address: 11000 Broken Land Parkway, Suite 700, Columbia, MD 21044

Director: Bruce Rothschild

Address: 11000 Broken Land Parkway, Suite 700, Columbia, MD 21044

B. Officers

President and CEO: Elizabeth O'Leary

Address: 11000 Broken Land Parkway, Suite 700, Columbia, MD 21044

Secretary and General Counsel: Bruce Rothschild

Address: 1 1000 Broken Land Parkway, Suite 700, Columbia, MD 21044

Assistant Secretary: Marian O'Connor

Address: 11000 Broken Land Parkway, Suite 700, Columbia, MD 21044

Vice President and Treasurer: Jeffrey Galentine

Address: 11000 Broken Land Parkway, Suite 700, Columbia, MD 21044

Vice President: Jeffrey Connolly

Address: 11000 Broken Land Parkway, Suite 700, Columbia, MD 21044

Vice President: Christopher Herrmann

Address: 11000 Broken Land Parkway, Suite 700, Columbia, MD 21044

Vice President: J.J. Amos

Address: 11000 Broken Land Parkway, Suite 700, Columbia, MD 21044

Senior Vice President: Sally Hebner

Address: 11000 Broken Land Parkway, Suite 700, Columbia, MD 21044

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TALLAHASSEE, FLORIDA

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STATE OF MARYLAND
Department of Assessments and Taxation

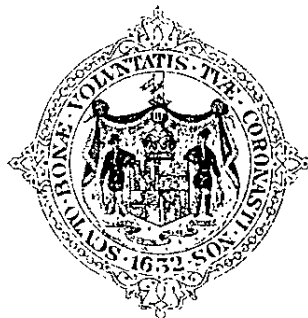
I, HEIDI DUDDERAR OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO THE FORFEITURE OR SUSPENSION OF CORPORATIONS, OR THE RIGHTS OF CORPORATIONS TO TRANSACT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

I FURTHER CERTIFY THAT ENTERPRISE COMMUNITY ASSET MANAGEMENT, INC., INCORPORATED JUNE 26, 2012, 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 APRIL 06, 2016.



Heidi Dudderar
Associate 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