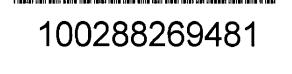
F14000004101

(Re	questor's Name)				
(Address)					
(Ad	dress)				
(Cit	y/State/Zip/Phone	· #)			
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificates	of Status			
Special Instructions to Filing Officer:					
	† 1				

Office Use Only



07/28/16--01027--014 **87.50

COVER LETTER

то:	O: Registration Section Division of Corporations					
SUBJ	ect: Ze	mel + Assac	lates, Inc			
			ation - must include suffix			
Dear S	ir or Madam:					
"Certif	ficate of Exister	ation by Foreign Corporation ace," or "Certificate of Good gn corporation to transact bu	Standing" and check are sul			
Please		spondence concerning this m	_			
		Name	e of Person			
Ze	emel 4	Associates Firm/	Inc			
19	5516 0	Office Park	Drive			
		A	ddress			
\bot	rantiar	nory Village, City/sta	MD 7088	ω		
,	7	City/Sta	te and Zip code			
	Lemel	City/Sta	· Com			
		E-mail address: (to be us	sed for future annual report	notification)		
For fur	ther information	n concerning this matter, plea	se call:			
Da	Name of Pers	on at (Code Daytime Telep	-3758_ hone 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				
Enclose	ed is a check fo	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		



August 18, 2016

DARRIN ZEMEL 18516 OFFICE PARK DRIVE MONTGOMERY VILLAGE, MD 20886

SUBJECT: ZEMEL & ASSOCIATES, INC

Ref. Number: W16000053086

We have received your document for ZEMEL & ASSOCIATES, 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):

You failed to make the correction(s) requested in our previous letter.

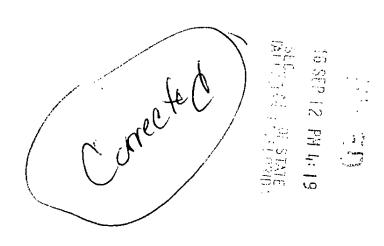
We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

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.

Jenna D Harris Regulatory Specialist II

Letter Number: 016A00016033





Centificate of Centificates or exsisting
TE oversisting

Spel Cast

Poche. FLORIDA DEPARTMENT OF STATE **Division of Corporations**

August 1, 2016

DARRIN ZEMEL 18516 OFFICE PARK DRIVE MONTGOMERY VILLAGE, MD 20886

SUBJECT: ZEMEL & ASSOCIATES, INC

Ref. Number: W16000053086

We have received your document for ZEMEL & ASSOCIATES, 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):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

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.

Jenna D Harris Regulatory Specialist II

Letter Number: 016A00016033

www.sunbiz.org

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. "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) (State or country under the law of which it is incorporated)

3. 62-0668679

(FEI number, if applicable) June 18, 2003 5.

(Date of incorporation) (Date of duration, if other than perpetual) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Florida Sun Vacation Homes, INC.
7802 W. Irlo Bronson Highway
(City), Florida 34747
(Zip code) Name: Office Address: 9. Registered agent's acceptance: Having been named us 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. . Marks

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.

(Registered agent's signature)

A. DIRECTORS Address: Mage, MD 20886 Vice Chairman: Address: Director: _ Address: __ Director: **B. OFFICERS** teramory Village, MD 208860 Vice President: Address: _ Secretary: _____ Treasurer: ______ NOTE: If necessary, you may attach 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 a third degree felony as provided for in s.817.155, F.S. 13. Darrin Famel

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

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

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 ZEMEL & ASSOCIATES, INC., INCORPORATED JANUARY 07, 2003, 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 AUGUST 08, 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