

FL 17000001341

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

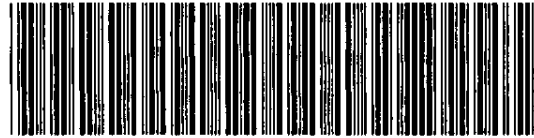
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

50% W17-19484

Office Use Only



700296039367

03/07/17--01017--026 **78.75

FILED
STATE
SECRETARY OF
TALLAHASSEE, FLORIDA
17 MAR -7 AM 11:58

MAR 23 2017
S. YOUNG



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 8, 2017

HARRY A LLOYD
HARRY A LLOYD & ASSOCIATES, LTD
76 CRANBROOK ROAD STE 264
COCKEYSVILLE, MD 21030

SUBJECT: HARRY A. LLOYD & ASSOCIATES, LTD
Ref. Number: W17000019484

We have received your document for HARRY A. LLOYD & ASSOCIATES, LTD and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The use of LIMITED or ~~LTD~~ is not acceptable as a corporate suffix. The name must include a word such as INCORPORATED, INC., CORPORATION, CORP., COMPANY, or CO.

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.

Shelia H Young
Regulatory Specialist II

Letter Number: 717A00004487

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
17 MAR -7 AM 11:50

2017 MAR 22 AM 11:38

TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations
Harry A. Lloyd & Associates, Ltd

SUBJECT: _____
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:
Harry A. Lloyd

_____	Name of Person
Harry A. Lloyd & Associates, Ltd	
_____	Firm/Company
76 Cranbrook Road, Suite 284	
_____	Address
Cockeysville, Maryland 21030	
_____	City/State and Zip code
Hal@HALAssoc.com	
_____	E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Harry A. Lloyd	443	794-8337
_____	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

FILED
STATE
SECRETARY OF
TALLAHASSEE, FLORIDA
17 MAR -7 AM 11:50

**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.*

Harry A. Lloyd & Associates, Incorporated

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

HAL & Associates, Incorporated

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
Maryland 52-2109578

2. _____ 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)
April 14, 1998

4. _____ 5. _____
(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)
76 Cranbrook Road, Suite 284, Cockeysville, MD 21030

7. _____
(Principal office address)
757 Pelican Bay Drive, Daytona Beach, Florida 32119

(Current mailing address, if different)

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

Harry A. Lloyd

Name: _____

757 Pelican Bay Drive

Office Address: _____

Daytona Beach

32119

_____, Florida _____
(City) (Zip code)

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.



(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.

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
17 MAR -7 AM 11:59

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

A. DIRECTORS

Chairman: Harry A. Lloyd
757 Pelican Bay Drive
Address: Daytona Beach, FL 32119

Vice Chairman: _____
Address: _____

Director: Lauren Z. Lloyd
757 Pelican Bay Drive
Address: Daytona Beach, FL 32119

Director: _____
Address: _____

B. OFFICERS

President: Harry A. Lloyd
757 Pelican Bay Drive
Address: Daytona Beach, FL 32119

Vice President: Lauren Z. Lloyd
757 Pelican Bay Drive
Address: Daytona Beach, FL 32119

Secretary: Lauren Z. Lloyd
757 Pelican Bay Drive, Daytona Beach, FL 32119
Address: _____

Treasurer: Lauren Z. Lloyd
757 Pelican Bay Drive, Daytona Beach, FL 32119
Address: _____

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

12. 
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. Harry A. Lloyd, President
(Typed or printed name and capacity of person signing application)

17 MAR - 7 AM 11:50
RECEIVED
DEPT. OF STATE
TALLAHASSEE, FLORIDA

STATE OF MARYLAND
Department of Assessments and Taxation

I, MICHAEL L. HIGGS 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 HARRY A. LLOYD & ASSOCIATES, LTD., INCORPORATED APRIL 14, 1998, 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 MARCH 02, 2017.



Acting 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

ST. JAMES OF FLORIDA
TALLAHASSEE, FLORIDA
17 MAR -7 AM 11:50

0010501095