

# F18000005715

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(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

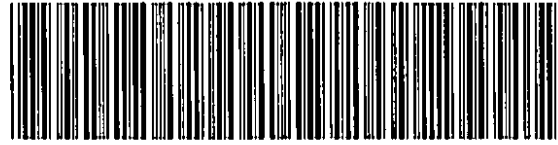
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_    Certificates of Status \_\_\_\_\_

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2018 DEC -3 PM 1:29  
CLERK OF DISTRICT COURT  
TALLAHASSEE, FLORIDA

D. BRUCE  
DEC 13 2018

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** APIT Solutions, 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:

Colleen Clarke Romero

\_\_\_\_\_  
Name of Person

APIT Solutions, Inc

\_\_\_\_\_  
Firm/Company

13645 Queens Harbor Blvd N

\_\_\_\_\_  
Address

Jacksonville, Florida 32225

\_\_\_\_\_  
City/State and Zip code

cleeromero@gmail.com

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

For further information concerning this matter, please call:

Colleen Clarke Romero

301 904-9750

at ( )

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

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 DIVISION OF CORPORATIONS  
 TALLAHASSEE, FLORIDA  
 2010 DEC -3 PM 1:29  
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**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.

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

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

2. Maryland 3. 52-1763884
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 01/16/1990 5.
(Date of incorporation) (Date of duration, if other than perpetual)

6. 11/27/2018
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 13645 Queens Harbor Blvd N
(Jacksonville, Florida 32225)
(Principal office address)
(Current mailing address, if different)

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

Name: Colleen Clarke Romero

Office Address: 13645 Queens Harbor Blvd N

Jacksonville, Florida 32225
(City) (Zip code)

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DEPARTMENT OF STATE
TALLAHASSEE FLORIDA

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.

Colleen Clarke-Romero
(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**

Chairman: Colleen Clarke Romero

Address: 13645 Queens Harbor Blvd N

Jacksonville, Florida 32225

Vice Chairman: Steven Bildman

Address: 13738 Chatsworth Lane

Jacksonville, Florida 32225

Director: N/A

Address: \_\_\_\_\_

Director: N/A

Address: \_\_\_\_\_

**B. OFFICERS**

President: Colleen Clarke Romero

Address: 13645 Queens Harbor Blvd N

Jacksonville, Florida 32225

Vice President: N/A

Address: \_\_\_\_\_

Secretary: Steven Bildman

Address: 13738 Chatsworth Lane Jacksonville, Florida 32225

Treasurer: Steven Bildman

Address: 13738 Chatsworth Lane Jacksonville, Florida 32225

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**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. Colleen Clarke Romero President

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

**STATE OF MARYLAND**  
**Department of Assessments and Taxation**

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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 AIRPORT PROPERTIES, INC. (D02938850), INCORPORATED JANUARY 16, 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 NOVEMBER 30, 2018.



Michael L. Higgs  
Director



*301 West Preston Street, Baltimore, Maryland 21201*  
*Telephone Baltimore Metro (410) 767-1340 / Outside Baltimore Metro (888) 246-5941*  
*MRS (Maryland Relay Service) (800) 735-2258 TTY/Voice*

Online Certificate Authentication Code: 8GbyC70syUKtcPRtpRYWSQ  
To verify the Authentication Code, visit <http://dat.maryland.gov/verify>