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(Requestor's Name)	<u> </u>
(Address)	 _
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,	
(City/State/Zip/Phone #)	
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PICK-UP WAIT	MAIL
(Business Entity Name)	
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Special Instructions to Filing Officer:	
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SECRETARY OF STATE

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FLORIDA DEPARTMENT OF STATE Division of Corporations

February 2, 2019

LORI NAY 318 E MAIN STREET SALISBURY, MD 21801 US

SUBJECT: AVERY HALL BENEFIT SOLUTIONS INC.

Ref. Number: W19000010970

We have received your document for AVERY HALL BENEFIT SOLUTIONS INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The certificate of existence must be issued within the last 90 days by the Secretary of State which has custody of the records in the jurisdiction under the laws of which the above listed entity is incorporated/organized.

Please return the corrected original and one copy of 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.

Janeice L Smith
Regulatory Specialist II
Registration Section

Letter Number: 819A00002399

COVER LETTER

	A	and the	
SUBJECT:		all Benefit Solution	<u> </u>
	Nam	ne of corporation - n	nust include suffix
Dear Sir or Madam:			
The enclosed "Applic "Certificate of Exister above referenced fore	nce," or "Certifica	ate of Good Standin	thorization to Transact Business in Florida," g" and check are submitted to register the n Florida.
Please return all corre	spondence conce	rning this matter to	the following:
	Loi	ri Nay	
		Name of Pers	son
	Avery	Hall Benefit Sol	utions, Inc.
		Firm/Compan	у
	318 E	Main Street	
		Address	
	Salisb	ury, Maryland 2	21801
		City/State and Z	ip code
······································		.ong@averyhall.	
	E-mail addre	ss: (to be used for fi	uture annual report notification)
or further information	concerning this	matter, please call:	
Lori Nay / Lnay@		_ at ()	677 - 3568
Name of Perso	M	Area Code	Daytime Telephone Number
Registration Sc	URIER ADDRES section rporations	SS:	MAILING ADDRESS: Registration Section Division of Corporations

☐ \$78.75 Filing Fce &

□ \$87.50 Filing Fee,

Ճ \$70.00 Filing Fee

☐ \$78.75 Filing Fee & Cartificate of Status

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

EN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

(If name	unavailable in Florida, enter alternate	e corporate name ac	lopted for the num	nose of transacting busin	age in Violeta	
2			50.4	480841	cza in nioride)	
(State o	or country under the law of which it is	Incomporated)		El manber, if applicable	-1	
4.	3-3-1986 .			• •	2)	
	(Date of hicorporation)	5	(Date of c	bretton, if other than pe	rpctual)	
6					. ,	
	(Date first trans (SBE SECTIONS 60	sacted business in F 07.1501 & 607.150	lorida, if prior to 2, F.S., to determi	registration) no ponsity llability)		
7		in Street , Sa				
		(Prinoipal	office address)	······		
 -	P.O. Box :	2317 , Salisb	ury, Marylar	nd 21802		
		(Current mailing	address, if differer	it)		
	1					
o, avaine an	d street address of Florida register	red agent: (P.O. I	Зох <u>NOT</u> вссер	table)	- ## 6	
Nac	me: Corporation Se	ervice Con	spuny		19	1
Office Adda	cos: 1201 Hays 5	strept			= ₹00 \$	
	Tollohoseen		 n-	201	<u> </u>	
	crs: 1201 Hays 5 Tallahassee (City)		_ , Florida 💢	<u> </u>	Se C)
0. 10			(ZI	p code)		
Having been	ed agent's acceptance: named as registered agent and to this application, I hereby accept	o accept service c	of process for th	e above stated corpor	atlon at the was	<i>a</i>
litther agree	this application, I hereby accept to comply with the provisions of am familiar with and accept the	Cutture is	e as regimeren a	gent and agree to act	In this capacity. rmance of my	I
		1		Gloria Nash Assistant VP		

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:	
	26.5 6
	## # T
B. OFFICERS	m o m
President:	Cynthia K. Whaley □ □ □
Address:	408 N Washington Street, Ste A., Easton, MD 21601
-	
Vice President:	Avery W. Hall Insurance Agency, Inc.
Address:	
Secretary:	Jill Long
Address:	308 E Main Street, Salisbury MD 21801
Treasurer:	Mary M. Mengason Vice President/Treasurer
\ddress:	318 E Main Street, Salisbury, MD 21801
	ou may attach an addendum to the application listing additional officers and/or directors.
2	M M approach of ficers and/or directors.
til so	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.

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 AVERY HALL BENEFIT SOLUTIONS, INC. (D02089340). INCORPORATED MARCH 03, 1986, 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 FEBRUARY 12, 2019.

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 TT/Voice