F2000000307

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
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JAN 17 COLD T. LEMMEUX

COVER LETTER

TO:	O: Registration Section Division of Corporations				
SUBJI	ECT: Hallme	ark Tile and	Marble Co., Income suffix	<u>c.</u>	
		Name of corporation	on - must include suffix		
Dear Si	r or Madam:				
"Certifi	icate of Existence," of		or Authorization to Transac anding" and check are sub- ness in Florida.		
		ence concerning this mat			
<u>J</u> e	Hrey Rob	ert Jagodzins	<u> </u>		
		Name o	of Person		
j.	tallmark T	ile and Marble Firm/Co	Co., Inc.		
			ompany		
,	1507 Hati	horne Ct.			
		Add	dress		
[-	Freeland, 1	1d. 21053			
	•	City/State	and Zip code		
,	Jeffiago @	Amail.com	d for future annual report n		
	- -	E-mail address: (to be use	d for future annual report n	otification)	
		cerning this matter, pleas			
Jef	Frey R. Jano	dziński au 4/0	ode Daytime Telepl	-	
	Name of Person	Area Co	ode Daytime Teleph	none 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 for the	following amount:			
□ \$ 70	.00 Filing Fee 🐧	\$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy	Certificate of Status & Certified Copy	
Effe	ctive Date	-Jan. 1,202	,0		

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. Hallma	ark <u>Tite and Marble</u>	Co. Inc.			
(Enter name of c	corporation; must include "INCORPORATED		ITON,"		
"Inc.," "Co.," "C	Corp," "Inc," "Co," or "Corp.")				
11	1				
Hallm	ank Tile Inc. able in Florida, enter alternate corporate name				
(If name unavail	able in Florida, enter alternate corporate name	e adopted for the purpose of trans	acting business in Florida)		
(State or countr	Maryland (State or country under the law of which it is incorporated) (FEI number, if applicable)				
4. Jan. 6	o 1989 5 of incorporation)	5. Perpervar	al al Iv		
		(Date of duration, if o	other than perpetual)		
6. <u>None</u>					
		in Florida, if prior to registration			
	(SEE SECTIONS 607.1501 & 607.	1502, F.S., to determine penalty if	iability)		
7. 150/	Hathorne Ct.				
	(Princ	cipal office address)			
Freela	ind, Md. 21053 (Current mail				
	(Current mail	ling address, if different)	#: <u>&</u>		
			F 5		
8. Name and stree	et address of Florida registered agent: (P	P.O. Box NOT acceptable)	2019 DICXP		
	Jafon Palact In of	zinch			
Name:	161118 VODEL 192000	4101	A F		
Office Address:	Jeffrey Robert Jagoda 12562 Cara Cara Loo	<u>p</u>	2 89		
		•	80		
	Bradenton (City)	Florida SF210			
	(City)	(Zip code)			
9. Registered age	ent'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.

Registored 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 R. Jagodzinski Chairman: Freeland, Md. 21053 Vice Chairman: Director: Address: Director: **B. OFFICERS** President: Jeffrey R. Jagodzinski Vice President: Deanna K. Greene Address: 1507 Hathorne Ct. Secretary: Address: _ Treasurer: Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Rignature of Director or Office: 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. (Typed or printed name and capacity of person signing application)

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 HALLMARK TILE & MARBLE CO., INC. (D02708725), INCORPORATED JANUARY 06, 1989, 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 DECEMBER 10, 2019.

Michael L. Higgs Director



301 West Preston Street, Baltimore, Maryland 21201 Telephone Balto. Metro (410) 767-1344 / Outside Balto. Metro (888) 246-5941 MRS (Maryland Relay Service) (800) 735-2258 TT/Voice

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