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(R	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to	o Filing Officer:	2

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JAN - 4 2022 M. SOLOMON

COVER LETTER

TO: Registration Section Division of Corporations	(40	Services,	Inc.	
SUBJECT: CAO Services, fine:	360 Re	Services, novations n-must include suffix	by CEO	.Inc
Na	me of corporatio	n - must include suffix	1 / 1	/
Dear Sir or Madam:				
The enclosed "Application by Foreig "Certificate of Existence," or "Certifiabove referenced foreign corporation	cate of Good Sta	nding" and check are st	sact Business in Flo abmitted to register	orida." the
Please return all correspondence cond	cerning this matte	er to the following:		
Erica Stuart				
	Name of	Person		
TORO Services. Inc. 3 (A P	envertue	ons by Cgo	Tre	
	Firm/Cor	npany	/	
6502 McCahill Dr.				
	Addi	ress	•	202:
Laurel, MD 20707				2022 JAN
	City/State	and Zip code		- 2
kirby@caoservices.com				
E-mail add	dress: (to be used	for future annual repor	t notification)	
For further information concerning the	nis matter, please	call:		₽: 59
Kyle Irby	at (850	de) 637-9684 Daytime Tele		
Name of Person	Area Coo	de Daytime Tele	ephone Number	_
STREET/COURIER ADDI Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite Tallahassee, FL 32303		Registration	Corporations 327	
-	A DEPARTMEN	T OF STATE ☐ \$78.75 Filing Fee & Certified Copy	■ \$87.50 Fil Certificate Certified C	of Status &

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.

-CXO 360 Reno	360 R	enovations by CEO, The opted for the purpose of transacting business in Florid	ر. رو.
Maryland	5	2-1730854	14 /
(State or countr	y under the law of which it is incorporated)	(FEI number, if applicable)	
0.1/22/1001			
(Date	of incorporation) 5.	(Date of duration, if other than perpetual)	
	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1502		
	1.5E.E. 5EX. FIVING 097.1201 & 007.1202		
6502 McCahill D			
. 6502 McCahill D	r. Laurel, MD 20707		
.6502 McCahill D			
6502 McCahill D	r. Laurel, MD 20707 (Principal office		202
·	r. Laurel, MD 20707 (Principal office	street address) iddress, if different)	2022 JAN -3
. Name and street Name:	(Principal office (Current mailing a address of Florida registered agent: (P.O. I	street address) iddress, if different)	JAN -3 PH
. Name and stree	(Principal office (Current mailing a address of Florida registered agent: (P.O. I Joshua Knox 1885 Shore Dr. Unit 539	street address) iddress, if different)	JAN -3

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.

A. DIRECTORS						
□Chairman	Nume:	□Chairman	Name: Nicole Vandenberg 260 Evelyne St. Address:			
□Vice Chairman	Address:	□Vice Chairman				□Vice Chairman Address: 260 Evelyne St.
□Director	Stevensville, MD 21666	□Director	Chester, MD 21619			
■ President		■ President				
□Vice President		□Vice President				
□ Secretary	☐Treasurer	☐ Secretary		☐ Treasurer		
□Other	Other	□Other		□Other		
□ Chairman	Name:	□ Chairman	Name:			
□Vice Chairman	Address:	□Vice Chairman	Address:			
□Director		□Director				
□President		□President				
□Vice President		□Vice President				
☐ Secretary	□Treasurer	☐ Secretary		☐ Treasurer:	2022	
□Other	□Other	□Other		$\square \text{Other}_{\underline{\underline{\underline{\underline{\underline{\underline{\underline{\underline{\underline{\underline{\underline{\underline{\underline{\underline{\underline{\underline{\underline{\underline$	2 JAN	
				184 184 184	$\frac{1}{3}$	
□ Chairman	Name:	□Chairman	Name:	<u>്</u> ചെ		<u> </u>
□ Vice Chairman	Address:	□Vice Chairman	Address:	⊃ .	<u>8</u>	
□Director		□Director	÷ <u></u> -	· · · · · · · · · · · · · · · · · · ·	<u>~</u>	
□President		□President				
□ Vice President		□Vice President				
Secretary	□Treasurer	☐ Secretary		□Treasurer		
□Other	□ Other	□Other		□Other		
individuals may be	Use an attachment to report more than six (6). The attace added to the index when alling your Florida Departme	chment vill be image nt of State Annual R	d for reporting p	ourposes only. Nor	1-indexe	ed
12	Signature of Director o	r Officer			ブー	
she is aware that for s.817.155, F.S.	etor signing this document (and who is listed in number alse information submitted in a document to the Depart of Stuart / Nicole Vandenberg					

STATE OF MARYLAND Department of Assessments and Taxation

I, MICHAEL I., 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 C & O SERVICES, INC. (D03204146), INCORPORATED APRIL 23, 1991, 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 09, 2021.

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

> Online Certificate Authentication Code: 8MxqXZz5rUKXJLD9qs-neg To verify the Authentication Code, visit http://dat.maryland.gov/vertfy



October 5, 2021

ERICA STUART C&O 360 RENOVATIONS 6502 MCCAHILL DR. LAUREL, MD 20707

SUBJECT: C&O 360 RENOVATIONS

Ref. Number: W21000132820

We have received your document for C&O 360 RENOVATIONS and check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

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.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 021A00024170

Mel Solomon Senior Section Administrator

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