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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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(Business Entity Name)

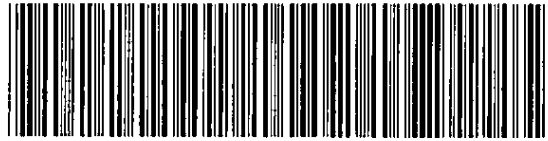
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DIVISION OF CORPORATIONS
24 JUN 21 PM 2:40



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 31, 2024

KATIE LANE CHAVERRI
2001 L STREET NW, SUITE 500
WASHINGTON, DC 20036 US

SUBJECT: CAPITAL BANCORP, INC.
Ref. Number: W24000081377

We have received your document for CAPITAL BANCORP, INC. 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 document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers listed.

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

Ariel Jones
Regulatory Specialist II

Letter Number: 724A00011835

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Capital Bancorp. 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:

Katie Lane Chaverri

Name of Person

Tayman Lane Chaverri LLP

Firm/Company

2001 I. Street NW, Suite 500

Address

Washington, DC 20036

City/State and Zip code

kchaverri@tlclawfirm.com

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

For further information concerning this matter, please call:

Katie Chaverri

at (202) 695-8146

Name of Person

Area Code

Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$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. Capital Bancorp. Inc.
(Enter name of corporation: must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

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

2. Maryland 3. 52-2083046
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 2/24/1998 5. perpetual
(Date of incorporation) (Date of duration, if other than perpetual)

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

7. 2275 Research Blvd., Suite 600, Rockville, MD 20850
(Principal office street address)

(Current mailing address, if different)

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

Name: CT Corporation
Office Address: 1200 S. Pine Island Drive
Plantation, Florida 33324
(City) (Zip code)

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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.

C T Corporation System Theresa Buck Theresa Buck, Assistant Secretary
(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. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS

☒ Chairman Name: Steven J. Schwartz
☐ Vice Chairman Address: 2275 Research Blvd., Suite 600
☒ Director Rockville, Maryland 20850
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: Edward Barry
☐ Vice Chairman Address: 2275 Research Blvd., Suite 600
☒ Director Rockville, Maryland 20850
☒ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☒ Other CEO ☐ Other _____


☐ Chairman Name: Jerome R. Bailey
☐ Vice Chairman Address: 2275 Research Blvd., Suite 600
☒ Director Rockville, Maryland 20850
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: James F. Whalen
☒ Vice Chairman Address: 2275 Research Blvd., Suite 600
☒ Director Rockville, Maryland 20850
☐ President _____
☐ Vice President _____
☒ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: Scot Browning
☐ Vice Chairman Address: 2275 Research Blvd., Suite 600
☒ Director Rockville, Maryland 20850
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☒ Other Asst. Secretary ☐ Other _____

☐ Chairman Name: Joshua Bernstein
☐ Vice Chairman Address: 2275 Research Blvd., Suite 600
☒ Director Rockville, Maryland 20850
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

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.

Eric M. Suss, EVP/Chief HR Officer

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

Capital Bancorp., Inc.
Attachment of Additional Directors in Response to Question 11A.
(Directors in excess of six listed on Application)

7. Scott Brannan
Director
2275 Research Blvd., Suite 600
Rockville MD 20850
8. Randall J. Levitt
Director
2275 Research Blvd., Suite 600
Rockville MD 20850
9. Deborah Ratner Salzberg
Director
2275 Research Blvd., Suite 600
Rockville MD 20850
10. Fred J. Lewis
Director
2275 Research Blvd., Suite 600
Rockville MD 20850
11. Mary Ann Scully
Director
2275 Research Blvd., Suite 600
Rockville MD 20850
12. Eric M. Suss
Executive Vice President and
Chief Human Resource Officer
2275 Research Blvd., Suite 600
Rockville MD 20850

STATE OF MARYLAND

Department of Assessments and Taxation

I, DANIEL K. PHILLIPS 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 CAPITAL BANCORP, INC. (D04919916), INCORPORATED FEBRUARY 24, 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 MAY 01, 2024.



Daniel K. Phillips
Director



700 East Pratt Street, 2nd Flr, Ste 2700, Baltimore, Maryland 21202
Telephone Baltimore Metro (410) 767-1344 / Outside Baltimore Metro (888) 246-5941
MRS (Maryland Relay Service) (800) 735-2258 TT/Voice