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To: Department Of State, Division Of Corporations

From: Amanda Miller

Ext: x62969 Date: 07/31/24 Order #: 1579660-1

Re: Blackwood Associates, Inc. Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Application for Certificate of Authority

Amount to be deducted from our State Account: \$70.00 - FL State Account Number:

120000000195

Certificate of Good Standing from State of Incorporation AUTH

Please take the following action:

File in your office on basis

Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

COVER LETTER

_	stration Section sion of Corporations			
SUBJECT:	Blackwood Associates, In	c.		
		of corporation - m	ust include suffix	
Dear Sir or M	ladam:			
"Certificate of	"Application by Foreign C of Existence," or "Certificate need foreign corporation to t	e of Good Standing	" and check are sub	
Please return	all correspondence concern	ing this matter to t	ne following:	
Lauren Jone	S			
		Name of Pers	on	
Blackwood A	ssociates, Inc.			
		Firm/Compan	v'	
1835 Forest	Drive, Suite A			
		Address		
Annapolis, M	D 21401			
		City/State and Z	ip code	
lauren@blac	kwood.ai; operations@blacl			
	E-mail addres	s: (to be used for fi	iture annual report i	notification)
For further in	formation concerning this n	natter, please call:		
Lauren Jones	S	at (443	518-5037	
Nam	e of Person	Area Code	Daytime Telep	hone 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	
	check for the following americk payable to: FLORIDA Ding Fee	EPARTMENT OF 1g Fee & 1 \$7	STATE 3.75 Filing Fee & rtified Copy	S87.50 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.

	corporation; must include "INCORPORATED," Corp," "Inc," "Co," or "Corp.")	"COMPANY." "CORPORATIO	N,"	
Blackwood				
(If name unavail	able in Florida, enter alternate corporate name ac	lopted for the purpose of transacti	ng business in Florida)	
Maryland 52		52-1076172		
(State or country under the law of which it is incorporated)		(FEI number, if a	(FEI number, if applicable)	
January 19, 19	9 77			
(Date	of incorporation)	(Date of duration, if other	(Date of duration, if other than perpetual)	
1835 Forest Dri	(SEE SECTIONS 607.1501 & 607.150 ive, Suite A, Annapolis, MD 21401 (Principal office	e <u>street</u> address)		
	(0 : 11:	11 15 155		
	(Current mailing	address, if different)	2024 1.2.1	
. Name and <u>stre</u>	et address of Florida registered agent: (P.O.	,	F1 2024 JUL 3 131 (341)	
Name and stree		,	FILE 2024 JUL 31 121 CALLASS	
Name:	et address of Florida registered agent: (P.O.	,		
	et address of Florida registered agent: (P.O. Corporation Service Company	,	- MA - Ea	

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.

Corporation Service Company
By:
(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	Name:	□Chairman	Name:Brett Cheplowitz		
□Vice Chairman	Address:	□Vice Chairman	Address:		
□Director	Suite A	□Director	Suite A		
President	Annapolis, MD 21401	□President	Annapolis, MD 21401		
□Vice President		■Vice President			
Secretary	□Treasurer	Secretary	□Treasurer		
□Other	Other	□Other	□Other		
□Chairman	Name:	□Chairman	Name: Bryan Hoffman 1835 Forest Drive		
□Vice Chairman	Address:	□Vice Chairman	Address:		
Director	Suite A	□Director	Suite A		
□President	Annapolis, MD 21401	□President	Annapolis, MD 21401		
■ Vice President	·	■ Vice President			
Secretary	□Treasurer	□Secretary	□Treasurer		
Other	Other	Other	Other		
□Chairman	Name:	□Chairman	Name: Mina Shirey		
□Vice Chairman	Address:	□Vice Chairman	Address:		
□Director	Suite A	□Director	Suite A		
□President	Annapolis, MD 21401	□President	Annapolis, MD 21401		
■Vice President		■ Vice President			
□Secretary	□Treasurer	☐ Secretary	□'f'reasurer		
□Other		□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 Private and P					

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.

Lauren B. Jones, VP of Business Operations

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 BLACKWOOD ASSOCIATES, INC. (D00724856), INCORPORATED JANUARY 19, 1977, 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 JULY 31, 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

> Online Certificate Authentication Code: s2NM0bQt0UusqlXse5nsKA To verify the Authentication Code, visit http://dat.maryland.gov/verify