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#### **COVER LETTER**

Registration Section
Division of Corporations

TO:

SUBJECT: MAINE ASSET MANAGEMENT  Name of Limited Liability Company
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida
Please return all correspondence concerning this matter to the following:
JEFFREY CHAPMAN Name of Person
Name of Person
MAINE ASSET MANAGEMENT Firm/Company
31 MAIN STREET Address
BANGOR, MAINE 04401  City/State and Zin Code
BANGOR, MAINE 04401  City/State and Zip Code  Chapman @ mamady 15 or 5. com  E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
at ( 20 ( ) 7 1 2 - 22 2 2 PM
Name of Contact Person Area Code Daytime Telephone Numbers  MAILING ADDRESS:  STREET ADDRESS:  Division of Corporations  Division of Corporations
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327  STREET ADDRESS: Division of Corporations Registration Section Clifton Building
Tallahassee, FL 32314  2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount:  \$\Bigsig \\$125.00 \text{ Filing Fee} \Bigsig \\$130.00 \text{ Filing Fee} \& \Bigsig \\$155.00 \text{ Filing Fee} \& \Bigsig \\$160.00 \text{ Filing Fee}, \text{ Certificate}
Certificate of Status Certified Copy of Status & Certified Copy

# APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGI	STER A
FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	
1. MAINE ASSET MANAGEMENT LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C" or "LLC.")	-
FLORIDA ASSET MANAGEMENT, LLC (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Lin	– nited
Liability Company," "L.L.C." or "LLC.")	
2. STATE of MAINE 3. 27-2855055  (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)	_
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)	
4. VA — UPON QUALIFICATION  (Date first transacted business in Florida, if prior to registration.)  (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	_
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	
5	_
31 MAIN STREET, BANGOR, ME, 04401 (Street Address of Principal Office)	_
5	<u>-</u> :
P.O. BOX 2010, BANGOR, ME, 04401	-
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:	
JEFFREY CHAPMON PCEO	Paris Caralan
31 MAIN STREET	
2000	Manas
BANGOR, ME 04401	41
3. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the off naving custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not	ficial
acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the transmust be submitted)	slator
Signature of an authorized person	
Signature of an authorized person In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated here an aware that any 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.)	
JEFFREY CHAPMAN	
Typed or wrinted name of signee	

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:
MAINE ASSET MANAGEMENT, LLC
If unavailable, the alternate to be used in the state of Florida is:
FLORIDA ASSET MANAGEMENT, LLC
2. The name and the Florida street address of the registered agent and office are:
JEFFREY CHAPMAN
(Name)
483 MANDALAY AVE., SUITE 200, BOX 23 Florida Street Address (P.O. Box NOT ACCEPTABLE)
CLEARWATER BEACH FL 33767

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, Florida Statutes.

(Signature)

\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

### State of Maine



## Department of the Secretary of State

I, the Secretary of State of Maine, certify that according to the provisions of the Constitution and Laws of the State of Maine, the Department of the Secretary of State is the legal custodian of the Great Seal of the State of Maine which is hereunto affixed and that the paper to which this is attached is a true copy from the records of this Department.



In testimony whereof, I have caused the Great Seal of the State of Maine to be hereunto affixed. Given under my hand at Augusta, Maine, this seventh day of August 2014.

Matthew Dunlap. Secretary of State

#### **Additional Addresses**

Legal Name	Title			
MAINE ASSET MANAGEMENT,	Registered	CURTIS E KIMBALL	20102408DC	GOOD STANDING
LLC	Agent			
Home Office Address (of foreign er	itity?)# Other	Mailing Address	Wall Case	
	84 HA	RLOW STREET		
1	BANG	OR, ME 04401		