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(Cit	y/State/Zip/Phone	e #)				
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(Document Number)						
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SECRETARY OF STATE
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COVER LETTER

10:	Division of Corporation	1 s	5	. •			
SUBJE	Resolve Consultants	s, LLC					
Name of Limited Liability Company							
		eign Limited Liability Com d to register the above refer					
Please r	eturn all correspondence of	concerning this matter to the	following:				
	Anthony R. Pil	eggi	,				
		N	lame of Person			•	
	Law Offices of	Anthony R. Pileggi, Charte	ered				
	Firm/Company ·						
	Post Office Box	x 302					
	Address						
	Clarksville, Maryland 21029						
		City/S	State and Zip Code			•	
	apilegg@pileggil	aw.net					
		E-mail address: (to be use	d for future annual	report not	ification)		
For furth	ner information concerning	g this matter, please call:					
	Anthony R. Pileggi		301	441-35			
	Name o	f Contact Person	Area Code	Day	time Telephone Number		
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314		ч	Division Registrati Clifton B 2661 Exe	ADDRESS: of Corporations on Section uilding cutive Center Circle ce, FL 32301		
Enclosed	is a check for the following \$125.00 Filing Fee	ing amount: ■ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filin Certified Copy	g Fee &	☐ \$160.00 Filing Fee, Co of Status & Certified Cop		

Law Offices

ANTHONY R. PILEGGI

Chartered P. O. Box 302 Clarksville, Maryland 21029

Howard County Offices 10211 Wincopin Circle Suite 620 Columbia, Maryland 21044 (301)441-3535 apileggi@pileggilaw.net Prince George's County Offices
Belle Point Office Park
7703 Belle Point Drive
Greenbelt, Maryland 20770

Please reply to post office box

Member of MD, D.C., PA Bar

July 13, 2015

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee FL 32301
Special Delivery

Re: Resolve Consultants, LLC

Attention:

Enclosed please find the following items on behalf of the above-referenced Maryland Limited Liability Company:

- 1. Application by Foreign Limited Liability Company for Authorization to Transaction Business in Florida;
 - 2. Required Cover Letter;
- 3. Certificate of Existence for Resolve Consultants, LLC issued by the Maryland State Department of Assessments and Taxation not more than ninety (90) days old (with the actual date of issuance June 1, 2015); and
- 4. Check payable to Florida Department of State in the amount of one hundred and thirty dollars (\$130.00), representing the filing fee for the application of \$100.00, the \$25.00 fee for the Designation of Registered Agent, and the \$5.00 fee for the Certificate of Status.

July 13, 2015 Division of Corporations Registration Section Page 2

Once approved, you may return the Certificate of Status to my mailing address in Clarksville, Maryland noted above or by e-mail. Thank you for your assistance.

Anthony R. Pileggi

Enclosures as stated

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 REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

, Resolve Consultants, L	LC				
(Name of Fore	eign Limited Liability Company; r	nust include "L	mited Liability C	ompany," "L.L.C.," o	or "LLC.")
(If name unavailable, enter al Liability Company," "L.L.C,	Itemate name adopted for the purp	oose of transacti	ng business in Flo	orida. The alternate na	ame must include "Limited
2. Maryland		3 45-4	1036067		
(Jurisdiction under the law company is organized)	of which foreign limited liability	J	(FEI	number, if applicable	e)
4. Upon qualification - ne	o business yet transacted in Flo	orida			<u></u>
	(Date first transacted bus (See sections 605.0904 & 6	iness in Florida. 05.0905, F.S. tc	if prior to registre determine penalt	ation.) v liability)	
5. 6465 Tembrooke	7				
Naples, Florida	ı				ALL SEC
	(Street Address of	of Principal Offi	ce)		- 异形
6. 6465 Tembrooke					15 T
Naples, Florida					JUL 16 PH 3: 32 LLANHASSEE, FLORIG
	(Mailin	ig Address)	·.		- Fro 4
7. Name and street address	s of Florida registered agent:	(P.O. Box <u>NC</u>	OT acceptable)		器 3
Name:	Kenneth O. Logan, Sr.				DM 10
Office Address:	6465 Tembrooke		· 		
	Naples		 , Flor	ida	
Registered agent's accep	(City)			(Zip code)	
this application, I hereby	Manual A Day on	istered agent (and agree to act performance of	t in this capacity. I	further agree to comply
	· ·			•	
-	icity and address of the person(s) who has/hav	ve authority to n	nanage is/are:	
Kenneth O. Logan, Sr.	. Pres.				
6465 Tembrooke					
Naples, Florida			••		
 Attached is a certificate urisdiction under the law of the translator must be su 	· •	certificate is i	n a foreign lang	uage, a translation o	; custody of records in the of the certificate under oath
	Kennel Marsan	m		<u> </u>	
	Signatu	re of an authoriz	zed person		
In accordance with section	1 605.0203, F.S., the execution	of this docum	ent constitutes a	an affirmation under	r the penalties of perjury that

Typed or printed name of signee

degree felony as provided for in s.817.155, F.S.)

Kenneth O. Logan, Sr.

the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third

STATE OF MARYLAND Department of Assessments and Taxation

I, PAUL B. ANDERSON 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 RIGHTS OF LIMITED LIABILITY COMPANIES. OR THE RIGHTS OF LIMITED LIABILITY COMPANIES TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT RESOLVE CONSULTANTS, LLC, FORMED DECEMBER 05, 2011, IS A LIMITED LIABILITY COMPANY EXISTING UNDER AND BY VIRTUE OF THE LAWS OF THE STATE OF MARYLAND, AND THAT THE LIMITED LIABILITY COMPANY IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING TO TRANSACT BUSINESS.

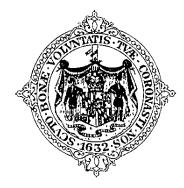
I FURTHER CERTIFY THAT THE ATTACHED IS A COMPLETE LIST OF ALL DOCUMENTS RELATING TO THE LIMITED LIABILITY COMPANY WHICH HAVE BEEN RECEIVED AND APPROVED FOR RECORD. WITH THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION.

SEE ATTACHED LIST FOR THE LIST OF ALL DOCUMENTS ON RECORD.

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 JUNE 01, 2015.

Paul B. Anderson Charter Administrator

Paul B. Andrew



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 Fax (410) 333-7097

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