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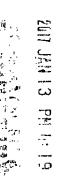
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COVER LETTER

Registration Section

TO:

Div	ision of Corporation	S					
SUBJECT:	Taylor & Ryan, LLC						
		Name of Limited Liability Company					
The enclosed Existence, an	d "Application by Fore and check are submitted	eign Limited Liability Compa I to register the above refere	any for Authoriza nced foreign limit	tion to Trar ed liability	nsact Business in Florida," Certificate company to transact business in Flor	of ida	
Please return	all correspondence co	oncerning this matter to the f	ollowing:				
	Mary E. Ryan						
	Name of Person						
	Taylor & Ryan						
	Firm/Company						
	5163 Genesee Pkwy,						
Address							
	Bokeelia, FL 33922						
	<u></u>	City/St	ate and Zip Code				
	mryan@taylor-ry	an.com					
		E-mail address: (to be used	for future annual	report noti	fication)		
For further i	nformation concerning	g this matter, please call:	410- 4	1/2-3	3467		
M	ary E. Ryan		410 - 4 443 at (-956-281	4		
	Name o	f Contact Person	Area Code	Day	time Telephone Number		
Di Re P.0	AILING ADDRESS: vision of Corporations gistration Section D. Box 6327 Ilahassee, FL 32314			Division of Registrati Clifton B 2661 Exe	CADDRESS: of Corporations ion Section uilding cutive Center Circle ee, FL 32301		
	a check for the follow \$125.00 Filing Fee	ing amount: \$\Bigsim \frac{1}{2} \frac{1}	□ \$155.00 Fili Certified Copy		☐ \$160.00 Filing Fee, Certificate 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 REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT RUSINESS IN THE STATE OF FLORIDA:

Taylor & Ryan, LLC.	ign Limited Liability Company: must include	e "Limited Liability Company," "L.L.C.," or	"LLC.")
(rimine or rose	igh Camito Diability Company, must meta-	Eminou Guotini, Company, 2:2:01, c.	,
iability Company," "L.L.C,"		sacting business in Florida. The alternate nam	e must include "Limited
Maryland	of which foreign limited liability	(FEI number, if applicable)	
company is organized)	of which foreign limited hability	(PEI number, II applicable)	
	(Date first transacted business in Flo	rida, if prior to registration.)	-
	(See sections 605.0904 & 605.0905, F.	S. to determine penalty liability)	
5163 Genesee Pkwy, B	. 100		
	(Street Address of Principal	Office)	
5163 Genesee Pkwy, Bo	okaalia El 22022		<u>_</u>
	(Mailing Address)		
. Name and street address	s of Florida registered agent: (P.O. Box	NOT acceptable)	
Name:	Mary E. Ryan		ing pa Language Con Language Con
Office Address:	5163 Genesee Pkwy		- 4 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1
	Bokeelia	, Florida 33922	_
	(City)	(Zip code)	
esignated in this applica complywith the provision	tion, I hereby accept the appointment a ons of all statutes relative to the proper my position as registered agent.	process for the above stated limited liabi is registered agent and agree to act in the and complete performance of my duties	is capacity. I further ag
	(Registered age	nr's signature)	
8. The name, title or capa	acity and address of the person(s) who ha	ns/have authority to manage is/are:	
Mary E. Ryan 🕝 🦳	ancery menby.		
163 Genesee Pkwy, Bok	eelia, FL 33922	· · · · · · · · · · · · · · · · · · ·	
urisdiction under the law	of which it is organized. (If the certificat	duly authenticated by the official having e is in a foreign language, a translation o	
of the translator must be s	ubmitted) // Signature of an all	Barrier Director	_
This document is executed ubmitted in a document to	d in accordance with section 605.0203 (1 to the Department of State constitutes a th	t) (b), Florida Statutes. I am aware that an ird degree felony as provided for in s.817	y false information 1.155, F.S.
	Mary E - P	yan ame of signee	_
	At so a Limita	U	

STATE OF MARYLAND Department of Assessments and Taxation

I, MICHAEL L. 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 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 TAYLOR & RYAN, LLC., REGISTERED OCTOBER 07, 2005, 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.

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 JANUARY 06, 2017.

Michael L. Higgs

Deputy Director





301 West Preston Street, Baltimore, Maryland 21201 Telephone Balto. Metro (410) 767-1340 / Outside Balto. Metro (888) 246-5941 MRS (Maryland Relay Service) (800) 735-2258 TT/Voice Fax (410) 333-7097