

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H170001221303)))



H170001221303ABCR

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (512)418-6949 : (954)208-0845 Fax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:\_

## Foreign Limited Liability Company Independent Claims Services of Maryland, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

MAY 0 4 2017

S. YOUNG

Electronic Filing Menu Corporate Filing Menu

Help

1/1

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

IN COMPILANCE 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:

1. Independent Claims Ser (Name of Force	rvices, LLC eign Limited Liability Company; mu	ist include "Limited Lia	bility Company," "L.L.C.," or "LLC	
Independent Claim (If name unavailable, enter al	s Services of Maryland, LLC Itemate name adopted for the purpo-	<u>:</u>		
Liability Company," "L.L.C,"	" or "LLC.")		•	
2. Maryland (Jurisdiction under the law company is organized)	of which foreign limited liability	3. 81-5158106	(Fhl number, if applicable)	
4. Upon Qualification		_		
	(Date first transacted busing 1Sec sections 605.0904 & 605	ess in Florida, if prior to 5.0905, F.S. to determine	registration.) penalty liability)	
5. 10150 York Rd. 5th FI	r, Hunt Valley, MD 21030			
and the state of t	(Street Address of	Principal Office)		
6. Same				
				TALL SEC
	(Mailing	Address)		Z HAY
7. Name and street address	ss of Florida registered agent: (P	O. Box NOT accept	able)	A A
Name:	C T Corporation System		<u>-</u>	မ တ
Office Address:	1200 South Pine Island Road		<del>.</del>	AY -3 AH 10: 35
	Plantation (City)	·	Florida 33324 (Zip code)	# B 3 €
designated in this applicate to complywith the provision	stance: rgistered agent and to accept ser stion, I hereby accept the appoin ons of all statutes relative to the nry position as registered agent, By: Tammy Tofteroo (Regis	itment as registered a proper und complete	gent and agree to act in this cap performance of my duties, and	ompany at the place pacity. I further agree
	(Regis	tered agent's signature)		
8. The name, title or caps	acity and address of the person(s	) who has/have author	rity to manage is/are:	
Nicholas Cortezi II, 1015	0 York Rd, 5th Flr, Hunt Valley,	, MD 21030 , Manas	<u>ger</u>	
			_	
9. Attached is a certificate jurisdiction under the law of the translator must be st	M	ertificate is in a foreign	gn language, a translation of the	edy of records in the certificate under eath
	•	e of an authorized person		a information
This document is executed submitted in a document to	d in accordance with section 605, the Department of State constitu	.0203 (1) (b), Florida ! utes a third degree fok	Statutes. I am aware that any fats ony as provided for in s.817.155,	, F.S.
	Nicholas Correzi	printed name of signer	and the second s	
	. ) pear or			

## TALLAHASSEE, FLORIDA

## 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 INDEPENDENT CLAIMS SERVICES, ŁLC, REGISTERED JANUARY 30, 2017, 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 FEBRUARY 27, 2017.

17 MAY -3 AM 10: 3

**Acting Director** 



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

0010497610