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#### **COVER LETTER**

TO:

Registration Section

Div	ision of Corporations						
SUBJECT:	BASHAM & SCOTT, LLC						_
	Na	me of Limit	ed Liability C	Company			
The enclosed Existence, an	I "Application by Foreign Limited Liability and check are submitted to register the above	y Company t e referenced	for Authoriza foreign limit	tion to Transact Busi ed liability company	iness in l to trans	Florida, act busi	" Certificate of ness in Florida.
Please return	all correspondence concerning this matter	to the follo	wing:				
	KIMBERLY B. SCOTT, ESQ.						
		Name o	of Person		Ίλιι. Βεί	2019 JUL	-
	BASHAM & SCOTT, LLC				AHA		- <u>-                                  </u>
		Firm/C	ompany			9 PM	m
	14 MAINE STREET, SUITE 413	Ad	dress		S S S	<del></del>	. 🖰
	BRUNSWICK, MAINE 04011				IDA A	2	
		City/State a	nd Zip Code				-
	kscott@bashamscott.com: pcaouette@						_
	E-mail address: (to	be used for	future annual	report notification)			
For further in	nformation concerning this matter, please c	call:					
PA	ULA CAOUETTE	at	207	208-8807 _)	_		_
	Name of Contact Person		Area Code	Daytime Telep	phone N	umber	
Div Reg P.O	ision of Corporations gistration Section Box 6327 lahassee, FL 32314			STREET ADDREST Division of Corpora Registration Section Clifton Building 2661 Executive Cer Tallahassee, FL 323	itions 1 nter Circ	le	
	closed is a check for the following amount: ase make check payable to: FLORIDA DE		NT OF STA	ГЕ			
' <b>=</b>	\$125.00 Filing Fee S130.00 Filing Certificate	g Fee & e of Status		Filing Fee &   cd Copy		_	Fee, Certificate rtified 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 BUSINESS IN THE STATE OF FLORIDA:

BASHAM & SCOTT, I					
(Name of Foreign	Limited Liability Company; must include "Limi	ted Liability	y Company," "L.L.C.," or "LLC.")		
(If name unavailable, enter alternate n	ame adopted for the purpose of transacting business in F	lorida. The al	ternate name must include "Limited Liabilit	ty Company," "L.1.	.C," or "L.I,C,"
CUMBERLAND COUN	NTY, MAINE	3.	06-1819815 (FEI number,		
(Jurisdiction under the law of wi	nich foreign limited liability company is organized)		(FEI number,	if applicable)	
06/24/2019 4.					
	(Date first transacted business in Florida, if prior t (See sections 605.0904 & 605.0905, F.S. to deter	to registration mine penalty	.) hability)	201  TĂĽ	
14 MAINE STREET, S	SUITE 413		14 MAINE STREET, SUITE		717
(Street Address of F	Principal Office)		(Mailing Address	1885 (575)	;
BRUNSWICK ME 04	4011		BRUNSWICK ME 04011		
				) <b>ኒ</b> : Տነ <sup>ኢ</sup> 'Lor	Ü
			<del></del>	<u> </u>	
7. Name and street address	ss of Florida registered agent: (P.O. Bo	ox <u>NOT</u> a	acceptable)		
				_	
Name:	Mechell Martinez			•	
Office Address:	7750 BELFORT PARKWAY, APT 1	127			
	JACKSONVILLE		32256 , Florida		
	(City)		(Zip cixle)		

Registered agent's acceptance:

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 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.

Mechell Martine

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity:	Name and Address:	<b>Title or Capacity:</b>	Name and Address:
Manager	Name: KIMBERLY B. SCOTT	☐ Manager	Name: THOMAS H. SCOTT
■Member	Address:	Member	Address:
Authorized	SUITE 413	☐ Authorized	SUITE 413
Person	BRUNSWICK ME 04011	Person	BRUNSWICK ME 04011
Other	Other	Other	Other
Manager	Name: PAULA CAOUETTE	☐ Manager	Name:
Member	Address:	☐ Member	Address: 📙 💢
Authorized	SUITE 413	Authorized	
Person	BRUNSWICK ME 04011	Person	19
Other	Other	Other	
Manager	Name:	☐ Manager	Name:
Member	Address:	☐ Member	Address:
Authorized		Authorized	
Person		Person	
Other	Other	Other	Other

indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am 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.

#### 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 of the reports of formation, amendment and cancellation of articles of organization of limited liability companies and annual reports filed by the same.

I further certify that BASHAM & SCOTT, LLC is a duly formed limited liability company under the laws of the State of Maine and that the date of formation is June 04, 2002: 1

I further certify that said limited liability company has filed annual reported the this Department, and that no action is now pending by or on behalf of the State of Maine-to forfeit the articles of organization and that according to the records in the Department of the Secretary of State, said limited liability company is a legally existing limited liability company in good standing under the laws of the State of Maine at the present time.

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 twelfth day of July 2019.

Matthew Dunlap Secretary of State

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