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COVER LETTER

TO:		ation Section n of Corporations					
SUBJE		81 Buttonwood Drive, LLC					
001		Name of Limited Liability Company					
			pany for Authorization to Transact Business in Florida," Certificate enced foreign limited liability company to transact business in Flori				
Please r	eturn all	correspondence concerning this matter to the	following:				
	Horace W. Horton						
	Name of Person						
		Drummond & Drummond, LLP					
		l.	irm/Company				
		One Monument Way					
			Address				
		Portland, ME 04101					
		City/State and Zip Code					
		rlutz@ddlaw.com					
		E-mail address: (to be used for future annual report notification)					
For furt	her infor	mation concerning this matter, please call:	> 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100 × 100				
Rene Lutz		Lutz	207 774-0317				
		Name of Contact Person	Area Code Daytime Telephone Number				
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
	Please	ed is a check for the following amount: make check payable to: FLORIDA DEPAR' 5.00 Filing Fee S130.00 Filing Fee & Certificate of St	☐ \$155.00 Filing Fee & ☐ \$160.00 Filing Fee, Certificate				

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:

	name adopted for the purpose of transacting business in Florida	The alternate name must include "Limited	Liability Company," "L L.C," or
Maine		20204927DC	
(Jurisdiction under the law of w	hich foreign limited liability company is organized)	3(FE] nu	inber, if applicable)
	(Date first transacted business in Florida, if prior to regis (See sections 605.0904 & 605.0905, F.S. to determine p	enalty liability)	
17 Peppergrass Roa	d		
et Address of Principal Office)		6. (Mailing Address)	· · · · · · · · · · · · · · · · · · ·
Cape Elizabeth, ME	04107		
			7
		(OT accentable)	
Name and street address	ss of Florida registered agent: (P.O. Box N	O 1 acceptable)	A T
	Dishard McChanney		23
Name:	Richard McChesney		
			- ω
	500 Fleming Street		
Office Address:	500 Fleming Street		
Office Address:		33040	
Office Address:	Kcy West (City)	33040 , Florida(Zip code	

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:	Title or Capacity:	Name and Address:
■Manager	Name:	□Manager	Name:
■Member	Address:	■Member	Address:
□Authorized	Cape Elizabeth, ME 04107	□Authorized	Cape Elizabeth, ME 04107
Person		Person	
□Other	Other	Other	Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
Authorized	Portland, ME 04101	□Authorized	
Person	-	Person	
Other	Other	Other	DÔther 2
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address: ₩
□Authorized		□Authorized	
Person		Person	
Other	Other	□Other	Other

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-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.

Horace W. Horton

Typed or printed name of signee

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 981 BUTTONWOOD DRIVE, LLC is a duly formed limited liability company under the laws of the State of Maine and that the date of formation is January 30, 2020.

I further certify that on:

January 30, 2020 CERTIFICATE OF FORMATION was filed.

No further amendments have been filed to date.

I further certify that said limited liability company has filed annual reports due to 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 eighteenth day of March 2020.

Matthew Dunlap Secretary of State