

M220 0000 5666

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

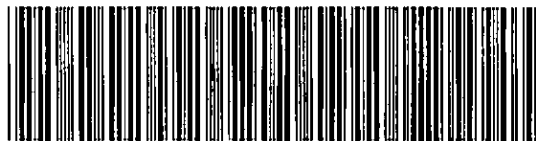
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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03/25/22--01008--014 **125.00

FILED
MAR 25 PM 4:35
CLERK OF COURT
STATE OF TEXAS

S. HAWKES
MAR - 2021

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TOAL, MURRAY, DAY & LALOR, LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

NORMA TOAL

Name of Person

TOAL, MURRAY, DAY & LALOR, LLC

Firm/Company

130 ADMIRAL COCHRANE DRIVE, SUITE 200

Address

ANNAPOLIS, MD 21401

City/State and Zip Code

NTOAL@TMDLCPA.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

NORMA TOAL

443

569-4609

Name of Contact Person

at ()

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

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☒ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
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 BUSINESS IN THE STATE OF FLORIDA:

1. TOAL MURRAY, DAY & LALOR, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. MARYLAND
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 82-2029500
(FEI number, if applicable)

4. 03/01/2022
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S., to determine penalty liability.)

5. 130 ADMIRAL COCHRANE DRIVE
(Street Address of Principal Office)

6. 130 ADMIRAL COCHRANE DRIVE
(Mailing Address)

SUITE 200

SUITE 200

ANNAPOLIS, MD 21401

ANNAPOLIS, MD 21401

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: InCorp Services, Inc.

Office Address: 17888 67TH COURT NORTH

LOXAHATCHEE, Florida
(City)

33470
(Zip code)

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.

Veronica Murillo

Veronica Murillo on behalf of InCorp Services, Inc.

(Registered agent's signature)

FILED
JUN 25 PM 4:31
STATE OF FLORIDA

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:
☐ Manager Name: THADDEUS TOAL
☒ Member Address: 130 ADMIRAL COCHRANE I
☐ Authorized SUITE 200
 ANNAPOLIS MD 21401
Person
☐ Other _____ ☐ Other _____

Title or Capacity: Name and Address:
☐ Manager Name: ADRIANNE DAY
☒ Member Address: 130 ADMIRAL COCHRANE I
☐ Authorized SUITE 200
 ANNAPOLIS MD 21401
Person
☐ Other _____ ☐ Other _____

☐ Manager Name: NORMA TOAL
☒ Member Address: 130 ADMIRAL COCHRANE I
☐ Authorized SUITE 200
 ANNAPOLIS MD 21401
Person
☐ Other _____ ☐ Other _____

☐ Manager Name: HEATHER LALOR
☒ Member Address: 130 ADMIRAL COCHRANE I
☐ Authorized SUITE 200
 ANNAPOLIS MD 21401
Person
☐ Other _____ ☐ Other _____

☐ Manager Name: JOHN P MURRAY
☒ Member Address: 130 ADMIRAL COCHRANE I
☐ Authorized SUITE 200
 ANNAPOLIS MD 21401
Person
☐ Other _____ ☐ Other _____


☐ Manager Name: _____
☐ Member Address: _____
☐ Authorized _____

Person
☐ 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.



Signature of an authorized person

NORMA TOAL

Typed or printed name of signee

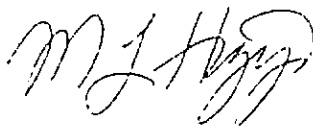
STATE OF MARYLAND

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 TOAL, MURRAY, DAY & LALOR, LLC (W18103747), REGISTERED JUNE 29, 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 MARCH 15, 2022.



Michael L. Higgs
Director



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

Online Certificate Authentication Code: rQasrSmA50GS1dDZhrkBAw
To verify the Authentication Code, visit <http://dat.maryland.gov/verify>