## M22100018314

(Re	equestor's Name)			
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PICK-UP	MAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
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S. FRANKLIN DEC \_ 9 2022

## 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. FREE STATE ACCOU	Limited Liability Company; must include "Limi	ed Liability Company," "L.L.C.," or "L.L.C.,")	<del></del>	
N/A				
(If name unavailable, enter alternate	name adopted for the purpose of transacting business in	Florida The alternate name must include "Limited Liabil	hty Company," "L.L.C," or "LLC.	
MARYLAND		88-3329166		
(Jurisdiction under the law of which foreign limited liability company is organized)		d) (FEI number, if applicable)		
N/A				
4	(Date first transacted business in Florida, if prior (See sections 605 0904 & 605,0905, F.S. to deter	o registration.) mine penulty liab(hiy)		
68 GARDA COURT		68 GARDA COURT		
5. (Street Address of Principal Office)		6. (Mailing Address)		
SAINT AUGUSTINE, FL 32095		SAINT AUGUSTINE, FL 320	95	
			27	
7. Name and street addre	ss of Florida registered agent: (P.O. Bo	x <u>NOT</u> acceptable)	70:11	
Name:	BRANDON N. MOURGES			
Office Address:	68 GARDA COURT			
	SAINT AUGUSTINE	32095 , Florida	<del>_</del>	
	(City)	(Zip code)		

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.

(Registered agent's signature)

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: BRANDON N. MOURGES	□Manager	Name: BRIAN J. CREPEAU
■Member	Address:	■Member	Address: 1344 ASHTON ROAD
□Authorized	SAINT AUGUSTINE, FL 32095	□Authorized	SUITE 110
Person		Person	HANOVER, MD 21076
Other	Other	□Other	Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	
□Other	Other	□Other	 Other
			21
□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.

Signature of an authorized person

BRANDON N. MOURGES

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 FREE STATE ACCOUNTING LLC (W23139132), REGISTERED JULY 20, 2022, 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 NOVEMBER 17, 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

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