

MZ3000002382

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

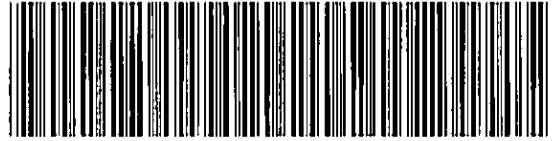
(Business Entity Name)

(Document Number)

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02/23/23--01008--011 \*\*5.00

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RECEIVED  
AND  
FILED  
2023 FEB 20 PM 12:43

FEB 23 2023

K. Brumby



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 3, 2023

CHRISTINA NANTZ  
7939 HONEYGO BLVD., STE. 217  
NOTINGHAM, MD 21236

SUBJECT: SHIPYARD ENGINEERING, LLC  
Ref. Number: W23000014620

We have received your document for SHIPYARD ENGINEERING, LLC and your check(s) totaling \$120.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The fee to file an LLC is \$125.00, Please return with a check or money order for an additional \$5.00. Also please include a letter stating that entity that you recently dissolved will not be reopened and you wish to use that name on the foreign application.,

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

KYLE D BRUMBLEY  
Regulatory Specialist II Supervisor

Letter Number: 523A00002623

**RECEIVED**  
FEB 29 2023



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Shipyard Engineering, LLC

2/15/2023

Kyle D Brumbley | Regulatory Specialist II Supervisor  
Florida Department of State  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**Subject: Shipyard Engineering, LLC Ref. Number W23000014620**

Mr. Brumbley

Shipyard Engineering, LLC the limited liability company that was filed on January 9, 2023, and effective January 3, 2023, document number L23000018979 was dissolved on January 19, 2023, will not be reopened and we wish to use that name on our foreign application.

If you have any questions or need additional information, please contact Christina Nantz at 443-900-7867.

Sincerely,

A handwritten signature in cursive script that reads 'Christina Nantz'.

Christina Nantz  
Business Manager\Director of Operations

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Shipyard Engineering, 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:

Christina Nantz

\_\_\_\_\_  
Name of Person

Shipyard Engineering, LLC

\_\_\_\_\_  
Firm/Company

7939 Honeygo Blvd, Ste 217

\_\_\_\_\_  
Address

Nottingham, MD 21236

\_\_\_\_\_  
City/State and Zip Code

cnantz@shipyardengineering.com

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

For further information concerning this matter, please call:

Christina Nantz

410

692-4337

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
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

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

**RECEIVED**  
JAN 20 2011

**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. Shipyards Engineering 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 3. 45-2460244  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 2/2019  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 7939 Honeygo Blvd, Ste 217 6. 7939 Honeygo Blvd, Ste 217  
(Street Address of Principal Office) (Mailing Address)

Nottingham, MD 21236 Nottingham, MD 21236

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

Name: C T Corporation System  
Office Address: 1200 S. Pine Island Road  
Plantation, Florida 33324  
(City) (Zip code)

2023 FEB 20 PM 12:43  
FILED  
APPROVED

**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.*

Nichol McCroy Nichol McCroy, Assistant Secretary  
(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]:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<input type="checkbox"/> Manager	Name: <u>John L. Watts</u>	<input type="checkbox"/> Manager	Name: <u>Christina Nantz</u>
<input checked="" type="checkbox"/> Member	Address: <u>7939 Honeygo Blvd, Ste 217</u>	<input type="checkbox"/> Member	Address: <u>7939 Honeygo Blvd, Ste 217</u>
<input type="checkbox"/> Authorized Person	<u>Nottingham, MD 21236</u>	<input checked="" type="checkbox"/> Authorized Person	<u>Nottingham, MD 21236</u>
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Manager	Name: _____	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: _____	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized Person	_____	<input type="checkbox"/> Authorized Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Manager	Name: _____	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: _____	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized Person	_____	<input type="checkbox"/> Authorized Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> 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.

Christina Nantz  
signature of an authorized person

Christina Nantz

Typed or printed name of signee

***STATE OF MARYLAND***  
***Department of Assessments and Taxation***

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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 SHIPYARD ENGINEERING LLC (W14135834), REGISTERED MAY 20, 2011, 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 JANUARY 19, 2023.



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 TTY/Voice*

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