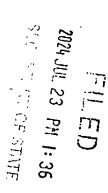
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(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				





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COVER LETTER

то:	Registration Section Division of Corporations					
aun II	Paquin & Carroll, LLC					
SUBJ		ne of Limited Liability Company				
The er Exister	nclosed "Application by Foreign Limited Liability nce, and check are submitted to register the above	Company for Authorization to Transact Business in Florida," Certificate of referenced foreign limited liability company to transact business in Florida				
Please	return all correspondence concerning this matter	to the following:				
	Douglas T. Prescott					
	Name of Person					
	New England Licensing Service, LLC					
		Firm/Company				
	120 N South Rd, Unit C, #219					
	Address					
	North Conway, NH 03860-5267					
	City/State and Zip Code					
	Licensing@InsurancePC.com					
	E-mail address: (to b	ne used for future annual report notification)				
For fu	rther information concerning this matter, please ca	all:				
Douglas T. Prescott		603 986-1893 at ()				
	Name of Contact Person	Area Code Daytime Telephone Number				
Mailing Address: Registration Section		Street Address: Registration Section				
Division of Corporations		Division of Corporations				
	P.O. Box 6327	The Centre of Tallahassee				
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
	Enclosed is a check for the following amount: Please make check payable to: FLORIDA DE ☐ \$125.00 Filing Fee ☐ \$130.00 Filing F Certificate	ee & 🔲 \$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 605.0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Paquin & Carroll, L1 (Name of Foreign 1)	.C Limited Liability Company; must include "Limited	l Liability (Company," "L.L.C.," or "LL.C.")		_
					_
If name unavailable, enter alternate n	ame adopted for the purpose of transacting business in Fl	orida The al	ternate name must include "Limited Liabil	ity Company," "L.L.C," o	r "LLC"
Maine		3.	47-2531402		
(Jurisdiction under the law of wh	nich foreign hmited liability company is organized)	٠	(FEI number, i	(fapplicable)	_
1					
	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determine	registration. I ne penalty li	ability)		
260 Main Street			PO Box 356		
). Street Address of Principal Office)		6	(Mailing Address)		
Biddeford, ME 04005-2419			Biddeford, ME 04005-035	6	
	· · · · · ·	_			
		_		7024	_
7. Name and street addres	s of Florida registered agent: (P.O. Box	<u>NOT</u> ac	cceptable)		-11
	InCorp Services, Inc.			23	
Name:				의 공	
Office Address:	3458 Lakeshore Drive			1:36 STATE	
	Tallahassee		32312 , Florida	전문 6	
	(City)		(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.

Amber Ragland on behalf of InCorp Services, Inc.
(Registered agent's vignature)

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:Joshua D. Fearon	■Manager	Name: Mark H. Jones
□Member	Address: 260 Main Street	□Member	Address: 252 Main Street
□Authorized	Biddeford, ME 04005	□Authorized	Saco, ME 04072
Person		Person	
□Other	Other	□Other	Other
■Manager	Name: Kevin P. Savage	■Manager	Name:Robert C. Quentin
□Member	Address: 50 Industrial Park Road	□Member	Address: 50 Industrial Park Road
□Authorized	Saco, ME 04072	□Authorized	Saco, ME 04072
Person		Person	
Other	Other	□Other	Other
□Manager	Name: Saco & Biddeford Savings Instit.	□Manager	Name:
■Member	Address: 252 Main Street	□Member	Address:
□Authorized	Saco, ME 04072	□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

Joshua D. Fearon

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

I further certify that PAQUIN & CARROLL, LLC formerly P AND C ASSURANCE, LLC is a duly formed limited liability company under the laws of the State of Maine and that the date of formation is November 10, 2014.

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 certificate of formation 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 fourth day of July 2024.

Shenna Bellows
Secretary of State