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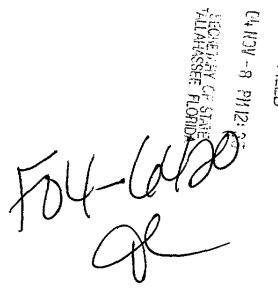
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special instructions to Filming Officer.
}

Office Use Only



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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: Basile Baumann Prost & Associates, Inc.
(Name of corporation - must include suffix)
Dear Sir or Madam:
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.
Please return all correspondence concerning this matter to the following:
Ralph Basile
(Name of Person)
Basile Baumann Prost & Associates, Inc.
(Firm/Company)
177 Defense Highway, Suite 10
(Address)
Annapolis, MD 21401
(City/State and Zip code)
For further information concerning this matter, please call:
Ralph Basile at (410) 266-7800
(Name of Person) (Area Code & Daytime Telephone Number)
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399 Enclosed is a check for the following amount: MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 DIVISION OF CORPORATIONS P.O. Box 6327 Tallahassee, FL 32314
\$70.00 Filing Fee \$\Bigcup \\$78.75 Filing Fee & \Bigcup \\$78.75 Filing Fee & \Bigcup \\$87.50 Filing Fee, Certificate of Status & Certified Copy Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1.	Basile Baumann Prost & Associates, Inc.	
	(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	
	(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)	•
2.	Maryland 3. 52-1670718	
	(State or country under the law of which it is incorporated) (FEI number, if applicable)	
4.	March 6, 1990 5, Perpetual	
	(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")	
6.		
	(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)	
7.	177 Defense Highway, Suite 10, Annapolis, MD 21401	
	(Principal office address)	
	177 Defense Highway, Suite 10, Annapolis, MD 21401	
	(Current mailing address)	
8.		_
	(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)	
9.	Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	FILED
	Name: Paula Graham 204 37th Any Moth St. 254	0
0	ffice Address: 204 37 h Am North, Ste 354	
	ffice Address: 204 37th Am North, Ste 354 St Patenhama, Florida 33704	
	(City) (Zip code)	

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation 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.

X See attached
(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

A. DIRECTORS_				
Chairman:				
Address:				
	. ———			
Vice Chairman:	 			
Address:		- -		· ······
Director:	. <u></u>			
Address:	 			
Director:	·			
Address:				
			·	
B. OFFICERS		-		
President: Jim Prost				
Address: 1107 Boucher Avenue	<u> </u>			
Annapolis, MD 21403				
Vice President: Wil Baumann		74. 24.	_ ⊙	
Address: 220 Leitch Road			0.54	
Tracy's Landing, MD 20779		ASSE	ු ද	T
Secretary: Ralph Basile		# 2	 	<u> </u>
Address: 412 Narrows Pointe Drive, Grasonville, MD 21638		SEST SEST SEST SEST SEST SEST SEST SEST	<u>ئن</u>	
Treasurer:		\$177	w	
Address:	,	<u> </u>		
Address.				
NOTE: If necessary, you may attach an addendum to the application listing addition	onal officers an	d/or directo	ors.	
13. My Soul				
(Signature of Director or Officer listed in number 12 of the ap	pplication)		_	
Ralph Basile, Secretary				
(Typed or printed name and capacity of person signing app	lication)			

· · ·

3. Saale Baumenn Prost & Associates, Inc.

Hav 01 04 03:12p

BBP Associates

410-266-7866

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607 ISGS, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA

If name unavailable in Florida, enter alternate corpor	ate name adoption for the purpose of transacting because in Florida)
Maryland	_s 62-1870718
State or country under the law of which it is incorpora	3 62-1870718 (FEI number if applicable)
Merch 6, 1990	A.S. Perpetual
(Date of incorporation)	(Duration: Year corp will couse to exist or "perpetual")
	maness in Florida, if prior to registration) & 607,1502, F.S., to determine penalty hability)
	•
77 Defense Highway, Suite 10, Annapolis, MD (Principal o	Mice address)
• •	21401
(Curten) ma	illing address)
•	
(Purpose(s) of corporation sutherized in home s	ions withing
(Purpose(s) of corporation sutherized in home s	finte or count. y to be carried out in state of Florida)
Name and arrest address of Florida registered age	ent (P.O. Box NOT acceptable)
Name: Paula Graham	_
teame. Total of the second	- Cl aril
Name: Paula Creaham Tico Address: 209 37th Am N	inh, shissy
St Peterstamo	, Florids 33704 (Zip code)
(City)	(Zio sode)
, , , , ,	Simple Control of the

(Registered agent's signiture)

and I am familiar with and recept the collections of my position as registered agent.

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction; under the law of which it is incorporated

12. Names and business addresses of officers and or directors:

STATE OF MARYLAND

Department of Assessments and Taxation

I, PAUL B. ANDERSON 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 THE FORFEITURE OR SUSPENSION OF CORPORATIONS, OR OF CORPORATIONS TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT BASILE BAUMANN PROST & ASSOCIATES, INC. IS A CORPORATION DULY INCORPORATED AND EXISTING UNDER AND BY VIRTUE OF THE LAWS OF MARYLAND AND THE CORPORATION HAS FILED ALL ANNUAL REPORTS REQUIRED, HAS NO OUTSTANDING LATE FILING PENALTIES ON THOSE REPORTS, AND HAS A RESIDENT AGENT. THEREFORE, THE CORPORATION IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING WITH THIS DEPARTMENT AND DULY AUTHORIZED TO EXERCISE ALL THE POWERS RECITED IN ITS CHARTER OR CERTIFICATE OF INCORPORATION, AND TO TRANSACT BUSINESS IN MARYLAND.

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 03, 2004.

Paul B. Anderson Charter Division

Paul B. Under



301 West Preston Street, Baltimore, Maryland 21201
Telephone Balto. Metro (410) 767-1340 / Outside Balto. Metro (888) 246-5941
MRS (Maryland Relay Service) (800) 735-2258 TT/Voice
Fax (410) 333-7097