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### **COVER LETTER**

TO: New Filing Se Division of Co					
B 450 -	•	ital and	Recovery Corp	oration	
SUBJECT: IVIIIIE			n - must include suffix		
Dear Sir or Madam:		•			
	ce," or "Certificate	of Good Sta	r Authorization to Transac anding" and check are sub- less in Florida.		
Please return all corres	pondence concerni	ng this matte	er to the following:		
Jayne Bronch	netti				
		Name of	f Person		
Millennium C	apital and F	Recove	ry Corporation		
		Firm/Co	mpany	, <u> </u>	
1595 George	town Rd., S	Suite A			
		Add	ress		
Hudson, Ohio	o 44236		<del></del>		
		-	and Zip code		
Jayne.bronche			for future annual report r	adification)	
	E-mail address	s: (to be used	i for future annual report i	ottification)	
For further information	n concerning this m	natter, please	call:		
Daniel Clevenger		at (330	, 528-1450 Ext. 8234		
Name of Pers			Area Code & Daytime Telephone Number		
STREET/COURIER ADDRESS: New Filing Section Division of Corporations		S:	MAILING ADDRESS: New Filing Section Division of Corporations		
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			P.O. Box 6327 Tallahassee, FL 32314		
Enclosed is a check for	r the following amo	ount:			
■ \$70.00 Filing Fee	□ \$78.75 Filin Certificate	~	□ \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status &	

### 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.

Millennium Capital and Recovery Corporation

	able in Florida, enter alternate corporate na	ame adopted for the purpose of transacting business	in Florida)
Ohio	<sub>3.</sub> 34-1884093		
•	under the law of which it is incorporated)	(FEI number, if applicable)	
February 10, 1999		<sub>s.</sub> Perpetual	
(Date	of incorporation)	(Duration: Year corp. will cease to exist or "p	perpetual")
		ess in Florida, if prior to registration) 07.1502, F.S., to determine penalty liability)	
1595 Ged	rgetown Rd., Suite A, H		
	(Principal office		
1595 Geo	rgetown Rd., Suite A, Hu	dson, Ohio 44236	
	_ <del></del>		<del></del>
	(Current mailing	address)	
Reposse	Current mailing ssion Management Sen		SECT
	ssion Management Ser		SECTET
(Purpose(	ssion Management Ser	VICES or country to be carried out in state of Florida)	SECRETARY TALLAHASSI
(Purpose(	ssion Management Sen	VICES or country to be carried out in state of Florida) (P.O. Box NOT acceptable)	SECRETARY OF
(Purpose(: Name and <u>stre</u> Name:	ssion Management Sen of corporation authorized in home state of et address of Florida registered agent:	vices or country to be carried out in state of Florida) (P.O. Box NOT acceptable)	SECRETARY OF CLA
(Purpose(s	ssion Management Sen of corporation authorized in home state of et address of Florida registered agent: CT Corporation System	vices or country to be carried out in state of Florida) (P.O. Box NOT acceptable)	SECHE TARY OF CHAIRA

P#: +

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.

CT Gorpuration Stem by:

Sierra Burts
Vice President & Assistant Secretary

(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: See attached.	
Address:	
····	
Director:	
Address:	
B. OFFICERS  President: Jayne R. Bronchetti	
Address: 6155 Ledgeview Dr.	141 SEI TANI
Peninsula, Ohio 44264	7
Vice President: Robert J. Bronchetti	55 G T
Address: 6155 Ledgeview Dr.	
Peninsula, Ohio 44264	
Secretary: Jean Centa	>
7646 Ellington Place, Mentor Ohio 44060	
Treasurer: Robert J. Bronchetti	
Address: 6155 Ledgeview Dr., Peninsula, Ohio 44264	
NOTE: If necessary, you may attach an addendum to the application listing additional  13.    Alegne R. Astonchetle, President   Signature of Director or Officer	officers and/or directors.
Signature of Director or Officer  The officer or director signing this document (and who is listed in number 12 above) at are true and that he or she is aware that false information submitted in a document to the a third degree felony as provided for in s.817.155, F.S.  Jayne R. Bronchetti, President	

#### FLORIDA APPLICATION BY FOREIGN CORPORATION DIRECTORS' LIST

Jayne Bronchetti 6155 Ledgeview Dr. Peninsula, Ohio 44264

Robert Bronchetti 6155 Ledgeview Dr. Peninsula, Ohio 44264

Jayson Bronchetti 411 Thayer Rd. Swarthmore, PA 19081

Jean Centa 7646 Ellington Place Mentor, Ohio 44060

James Ahern 7666 Hudson Park Dr. Hudson, Ohio 44236

James Holt 71 Great Oak Dr. Hudson, Ohio 44236

# UNITED STATES OF AMERICA STATE OF OHIO OFFICE OF THE SECRETARY OF STATE

I, Jon Husted, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show MILLENNIUM CAPITAL AND RECOVERY CORPORATION, an Ohio corporation, Charter No. 1064984, having its principal location in Hudson, County of Summit, was incorporated on February 10, 1999 and is currently in GOOD STANDING upon the records of this office.

14 MAY 19 AH 7

Witness my hand and the seaf-of-the Secretary of State at Columbus, Ohio this 16th day of May, A.D. 2014.



Ohio Secretary of State

Validation Number: 201413600854