FH00000342

, (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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Office Use Only



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08/08/14--01026--008 **78.75

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Eton Tower 28601 Chagrin Blvd., Suite 500 Cleveland, Ohio 44122 phone: **216.831.0042** fax: **216.831.0542** www.meyersroman.com

Linda A. Csepi, Ext. 135 lcsepi@meyersroman.com

August 7, 2014

VIA OVERNIGHT MAIL

Florida Department of State New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Re: MCM National, Inc.

Dear Sir/Madam:

Enclosed, on behalf of the above captioned entity, please find an original Application by Foreign Corporation for Authorization to Transact Business in Florida, along with a Good Standing Certificate issued by the Ohio Secretary of State and a check in the amount of \$78.75 in payment of the applicable filing fee and Certificate of Status.

Please file the original and return the Certificate of Status to me in the enclosed self-addressed envelope.

Should you have any questions regarding the foregoing, please do not hesitate to contact me.

Very truly yours

Linda A. Csepi

Paralegal

:lac

Enclosures



COVER LETTER

	New Filing Section Division of Corporations					
SUBJE	CT. MCM	National,	Inc.			
БСБСЕ				on - must inclu	ıde suffix	
Dear Sir	or Madam:					
"Certific	cate of Existence		of Good Sta	anding" and c	heck are sub	ct Business in Florida," omitted to register the
	eturn all corresp a A. Csep	ondence concerni	ng this matt	er to the follo	wing:	
			Name o	f Person		
Mey	ers, Roma	an, Friedbe	erg & Le	ewis		
			Firm/Co	mpany		
2860)1 Chagri	n Boulevar	d, Suite	e 500		
Clev	eland, Oł	nio 44122	Add	ress		
			City/State	and Zip code		
Icsep	i@meyers	roman.com				
		E-mail address	: (to be used	l for future an	nual report	notification)
For furth	her information	concerning this m	atter, please	call:		
Linda	a A. Csep	oi	216	, 831-	0042	
	Name of Person		Area	831-0 Code & Day	time Teleph	one Number
		,				
	STREET/COU New Filing Sec Division of Cor Clifton Building 2661 Executive Tallahassee, FL	porations S Center Circle	S:	No Di P.	IAILING A ew Filing So ivision of Co O. Box 632' allahassee, F	ection orporations 7
Enclose	d is a check for	the following amo	ount:			
5 \$70.0	00 Filing Fee	S78.75 Filing Certificate of		S78.75 Fil Certified C		\$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.

(Enter name of co	cional, Inc. propration; must include "INCORPORATED, orp." "Inc," "Co," or "Corp.")	" "COMPANY," "CORPORAT	TION,"	
(If name unavaila	ble in Florida, enter alternate corporate name	adopted for the purpose of transa	acting business in Florida)	
_{2.} Ohio	3			
(State or country	under the law of which it is incorporated)	(FEI number, if applicable)		
_{4.} May 6, 20)13	perpetual		
	of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")		
6.		•		
	(SEE SECTIONS 607.1501 & 607.1 ds Harbor Trace, Pompan (Principal office add)	o Beach FL 33069	ability)	
	(Current mailing add	lress)		
Name:	t address of Florida registered agent: (P. Brian Miller 3411 Sands Harbor Trae		14 AUG -8	
Office Address:			AH 9: 05	
	Pompano Beach	, Florida 33069		
	(City)	(Zip code)	₩	

9. 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.

(Registered agent's signature)

10. 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.

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

A. DIRECTORS Chairman: Brian Miller	
Address: 3411 Sands Harbor Trace, Pom	pano Beach, Florida 33069
	
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS	
President: Brian Miller	I I
Address: 3411 Sands Harbor Trace, Pom	pano Beach, Florida 33👯
	- 第一
	Print Control of the
Vice President:	<u></u>
Address:	
	¥ tsi €
Secretary: Brian Miller	
Address: 3411 Sands Harbor Trace, Pom	pano Beach,Florida 33069
Treasurer: Brian Miller	
Address: 3411 Sands Harbor Trace, Pom	pano Beach, Florida 33069
NOTE: If necessary, you may attach an addendum to the a	pplication listing additional officers and/or directors.
12. Signature of Div	rector or Officer
The officer or director signing this document (and who is li	sted in number 12 above) affirms that the facts stated herein abmitted in a document to the Department of State constitutes

(Typed or printed name and capacity of person signing application)

13. Brian Miller, President

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 MCM NATIONAL, INC., an Ohio corporation, Charter No. 2196686, having its principal location in Mayfield Heights, County of Cuyahoga, was incorporated on May 6, 2013 and is currently in GOOD STANDING upon the records of this office.



Witness my hand and the seal of the.
Secretary of State at Columbus Ohio this 7th day of August, A-D. 2014

70 17 1820

Ohio Secretary of State

Validation Number: 201421901028