

8/24/2021

Division of Corporations

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6383

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Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
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FLORIDA/FOREIGN LP/LLLP

Biofit Engineered Products Limited Partnership

Certificate of Status	0
Certified Copy	1
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Estimated Charge	\$1,052.50

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SECRETARY OF STATE
TALLAHASSEE, FL

Electronic Filing Menu

Corporate Filing Menu

Help

**APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR
LIMITED LIABILITY LIMITED PARTNERSHIP
TO TRANSACT BUSINESS IN FLORIDA**

1. BIOFIT ENGINEERED PRODUCTS LIMITED PARTNERSHIP

(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix)

Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.

Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.

If name unavailable, name under which the limited partnership or limited liability limited partnership proposes to register to transact business in Florida; must contain acceptable suffix.

2. DE

State or Country of Formation

3. 12/30/1992

Date of Formation

4. Federal Employer Identification Number: 52-1819340

5. Name of Registered Agent for Service of Process and Florida Street Address:

C T Corporation System

1200 South Pine Island Road

Plantation, Florida 33324

6. 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.

By: [Signature]

Signature of Registered Agent

7. Principal Office:

BioFit Engineered Products Limited Partnership

15500 BioFit Way

Bowling Green, OH 43402

8. Mailing Address:

BioFit Engineered Products

P.O. Box 109

Waterville, OH 43566-0109

9. If limited partnership is a limited liability limited partnership, check box. ☐

10. Name, principal office address, and mailing address of each general partner:

Name of General Partner: BioFit Engineered Products, Inc.

Name of General Partner: _____

Street Address: 15500 BioFit Way

Street Address: _____

Bowling Green, OH 43402

Mailing Address: P.O. Box 109

Mailing Address: _____

Waterville, OH 43566-0109

Name of General Partner: _____ Name of General Partner: _____

Street Address: _____ Street Address: _____

Mailing Address: _____ Mailing Address: _____

Name of General Partner: _____ Name of General Partner: _____

Street Address: _____ Street Address: _____

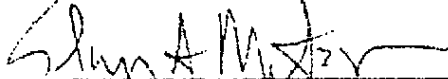
Mailing Address: _____ Mailing Address: _____

11. Effective date, if other than the date of filing: _____

*(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)***Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

Signed this 13th _____ day of August 2021



Signature of a general partner

The individual signing this document affirms that the facts stated herein are true and the individual is aware that 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.

Filing Fees:	\$1,000.00 (\$945 Filing Fee and \$55 Registered Agent Fee)
Certified Copy (optional):	\$52.50
Certificate of Status (optional):	\$8.75



August 13, 2021

To Whom It May Concern:

The General Partner of BioFit Engineered Products Limited Partnership is BioFit Engineered Products, Inc. I, Edward A. Metzger, am President of this Corporation.

As an officer of the corporate general partner, I have authority over BioFit Engineered Products Limited Partnership's affairs and can bind the Limited Partnership under contract and otherwise in my capacity as an officer of the General Partner.

If there are any questions or clarifications needed, please feel free to contact me at 419-823-1502 or by email at ed.metzger@biofit.com.

Sincerely,

A handwritten signature in black ink, appearing to read "Ed Metzger", is written over a horizontal line.

Edward A. Metzger
President of General Partner
BioFit Engineered Products

PO Box 109
Waterville, OH
43566
t: 800.597.0246
o: 419.823.1089
f: 419.823.1342
biofit@biofit.com

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "BIOFIT ENGINEERED PRODUCTS LIMITED
PARTNERSHIP" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE
AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE
RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FOURTH DAY OF AUGUST,
A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN
PAID TO DATE.



2320842 8300

SR# 20213060041

You may verify this certificate online at corp.delaware.gov/authver.shtmlA handwritten signature of Jeffrey W. Bullock in black ink, written over a horizontal line.

Jeffrey W. Bullock, Secretary of State

Authentication: 203991014

Date: 08-24-21