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| (Re | equestor's Name) | | | |
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| PICK-UP | ☐ WAIT | MAIL | | |
| (Bu | siness Entity Nar | me) | | |
| (Document Number) | | | | |
| Certified Copies | _ Certificates | s of Status | | |
| Special Instructions to | Filing Officer: | | | |
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SEC SETARY OF STATE

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TRANSMITTAL LETTER

| | egistration Section Pivision of Corporation | ıs | | | | | |
|--------------------|---|------------------------------------|----------------------|--|-----------------------------|-----------------------------------|---|
| SUBJEC | T: Patrick | Brennan & | | | | | |
| | | (Name of corp | oration · | - must include suffix | :) | | |
| Dear Sir c | or Madam: | | | | | | |
| "Certifica | sed "Application by F te of Existence," and c usiness in Florida. | | | | | | |
| Please reti | um all correspondence | concerning this n | att er to | the following: | | | |
| Bill | Call | | | | | | |
| | | (Net | ne of Pe | erson) | | | • |
| Bren | nan & Associ | ates | | | | | |
| | | (Fire | n/Comp | any) | | | |
| <u>15</u> 50 | East 33rd S | t | | | | | |
| | | (| Address |) | | | |
| Clev | eland, Ohio | 44114 | | | | | |
| | | (City/S | tate and | Zip code) | | - To | |
| For further | ninformation concerni | ng this matter, ple | ase call: | | | JSEP 2 | |
| Bil1 | Call | at (_21 | 6 ₎ | 391-4822 | | 3 F | |
| 7 | Name of Person) | (A | rea Cod | e & Daytime Telep! | one Number) | 3 PK 1: 47 Y OF STATE SEE FLUXION | |
| Re Dî 409 | REET ADDRESS: gistration Section vision of Corporations 9 E. Gaines St. Ilahassee, FL 32399 | ; | | MAILING A Registration S Division of C P.O. Box 632 Tallahassee, F | Section orporations 7 | | |
| Enclosed is | a check for the follow | ving amount: | | | | | |
| □ \$70.00 1 | | 75 Filing Fee & tificate of Status | \$ \$7 C | 8.75 Filing Fee & ertified Copy | S87.50 Fi | te 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.

| Brenna | n & Asscociates | | • | |
|------------------|---|--------|---|------------------|
| (If name unave | lable in Plorida, enter alternate corporate n | ame a | adopted for the purpose of transacting busin | iess in Florida) |
| Ohio | | 3. | 34-1230950 | |
| (State or countr | under the law of which it is incorporated) | | (FEI number, if applicable) | |
| 10/19/ | 1977 | 5. | Perpetual | |
| (Da | e of incorporation) | | (Duration: Year corp. will cease to exist o | or "perpetual") |
| N/A | | | | |
| | | | Florida, if prior to registration) 12, F.S., to determine penalty liability) | |
| 1550 | East 33rd Street Cl | eve | eland, Ohio 44114 | |
| | (Principal office | addr | 955) | <u> </u> |
| Same | | | | SEC SEC |
| | (Current mailing | addr | ess) | 10 E |
| То со | nduct any lawful busin | ess | 3 | SSEA SSEA |
| (Purpose | s) of corporation authorized in home state of | OT COL | intry to be carried out in state of Florida) | FOF S |
| Name and stre | et address of Florida registered agent: (| (P.O. | Box NOT acceptable) | PA 1:4 |
| Name: | Business Support Inc | • | _ | \$ 5 |
| ffice Address: | 417 Stowe Ave, Suite | _2 | | |
| | Orange park | | Florida <u>32073</u> | |

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)

^{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: | |
| Address: | |
| | |
| Director: | |
| Address: | |
| B. OFFICERS | SEC |
| President: David Masciarelli | <u> </u> |
| Address: 1550 East 33rd St, cleveland, Ohio 44114 | SSE 23 |
| Vice President: Rick Johnston | PH I: |
| Address: 1550 East 33rd St. Cleveland, OH 44114 | Ş - 5 |
| Secretary: | |
| Address: | |
| Treasurer: B.11 Call | |
| Address: 1550 East 33rd St. Cleveland, OH 44114 | |
| NOTE: If necessary, you may attach an addendum to the application listing additional officers and | d/or directors. |
| (Signature of Director or Officer listed in number 12 of the application) | |
| 14. Bill Call, Treasurer (Typed or printed name and capacity of person signing application) | |
| (x) her or brunen name and capacity of beigott affamil abbueitton) | |

United States of America State of Ohio Office of the Secretary of State

I, J. Kenneth Blackwell, 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 corporations; that said records show PATRICK BRENNAN AND ASSOCIATES, INC., an Ohio corporation, Charter No. 505888, having its principal location in Cleveland, County of Cuyahoga, was incorporated on October 19, 1977 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 23rd day of August, A.D. 2005

Ohio Secretary of State

Validation Number: V2005235ADA6C1