F0900000 1822

(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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COVER LETTER

TO: Amendment Section Division of Corporations	. •
SUBJECT:ADD PRINCIPAL OFFICER - ANDR	EW D HILL
	Name of Corporation
DOCUMENT NUMBER: F09000001822	
The enclosed Affidavit by Foreign Corporate submitted for filing.	ion to Change/Add Officer(s) and/or Director(s) and fee are
Please return all correspondence concerning	this matter to the following:
MANDY LEBEAU	
Name of Contact Person	
CESO, INC.	
Firm/Company	
3601 RIGBY ROAD	
Address	
MIAMISBURG, OH 45342	
City/State and Zip Code	
lebeau@cesoinc.com	
E-mail address: (to be used for future annua	I report notification)
For further information concerning this matte	er, please call:
MANDY LEBEAU	937 435-8584 at ()
Name of Contact Person	at () Area Code & Daytime Telephone Number
Enclosed is a check made payable to the Flor	ida Department of State for the following amount:
■\$35.00 Filing Fee □ \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) S52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
Mailing Address:	Street Address:
Amendment Section	Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

COVER LETTER

	ent Section Division of Corporati		
SUBJECT:	CESO, Ir	<u>.c.</u>	
		e of Corporation	
DOCUMENT NU	MBER: <u></u> F09000	001822	
The enclosed Ame	ndment and fee are submitted for	filing.	
Please return all co	rrespondence concerning this ma	itter to the following:	
Man	dy LeBeau Name of Contact Person		
	Name of Contact Person		
CE	50, Inc. Firm/Company		
	Firm/Company		
360	or Rigby Rd., Ste	300	
	Address		
Mian	misburg, OH 453	342	
	City/State and Zip Code		
lebe	au@cesoinc.co	om	
E-mail addre	ss: (to be used for future annual	report notification)	
For further informa	ation concerning this matter, plea	se call:	
	LeBeau	at (<u>937</u>) <u>435-8</u> Area Code & Daytime 1	584 Ext 1108
Name	e of Contact Person	Area Code & Daytime	Felephone Number
Enclosed is a check	k for the following amount:		
1\$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & Certified Copy	☐ \$52.50 Filing Fee. Certificate of Status & Certified Copy

Mailing Address:

Amendment Section Division of Corporations P.O. Box 6327

Street Address:

Amendment Section Division of Corporations The Centre of Tallahassee



April 20, 2020

5/7/20 Appl. to ARM for review+signature

MANDY LEBEAU 3601 RIGBY ROAD MIAMISBURG, OH 45342

SUBJECT: CESO, INC.

Ref. Number: F09000001822

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden Regulatory Specialist II

4/28/20 Left msg.

Letter Number: 320A00008160

PROFIT CORPORATION

APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607.1504, F.S.)

SECTION 1 (1-3 MUST BE COMPLETED) FO900001822 (Document number of corporation (if known) CESO, Inc. Dration as it appears on the records of the Department of State) 3. 5/1/2009 (Date authorized to do business in Florida)

	GESO, INC.		
(Name of corporation	i as it appears on the record	s of the Department of Sta	ite)
Ohio (Incorporated under laws of)	3.	5/1/2009	
(Incorporated under laws of)		(Date authorized to do l	ousiness in Florida)
	SECTION II		
(4-7 COMPL	ETE ONLY THE APPLI	CABLE CHANGES)	
If the amendment changes the name of the corpora	tion, when was the change	effected under the laws of	its jurisdiction of
incorporation?		 	
(Name of corporation after the amendment, adding not contained in new name of the corporation)	g suffix "corporation," "con	npany," or "incorporated,"	or appropriate abbreviation.
(If new name is unavailable in Florida, enter altern	ate corporate name adopted	for the purpose of transac	ting business in Florida)
If the amendment changes the period of durat	ion, indicate new period of	duration.	
,	· · · · · · · · · · · · · · · · · · ·		
	(New duration)		
teater and the season of the best of the	·	otoota Itaaloo	
. If the amendment changes the jurisdiction of	incorporation, indicate new	jurisaiction.	
	(New jurisdiction)		_
	(New Jurisdiction)		
If amending the registered agent and/or registe	ered office address in Flor	ida, enter the name of th	e
new registered agent and/or the new registered			
Name of New Registered Agent			
	(Florida street address)	
New Registered Office Address:			(Zip Code)
	(City)		(Zin Code)
	10.17)		(111), 20110,

itle/ Capacity	<u>Name</u>	<u>Address</u>	Type of Action
ice fresident FArchitectural Services Andrew D. Hill	9130 Holly Hill Farm F Charlotte, NC 2827	Road 7	
			Remove
			Add
			Remove
		<u></u>	QAdd
			Remove
			□Add
			Remove
			□Add
			Remove
Attached is a certiful of the application to under the laws of w	icate or document of similar im the Department of State, by the hich it is incorporated.	port, evidencing the amendment, authentic Secretary of State or other official having c	cated not more than 90 days prior to delustody of corporate records in the jurisdi
	In Mon		
	(Signature of	n director, president or other officer - if in other court appointed fiduciary, by that fid	ine nands of

FILING FEE \$35.00