

F10000003455

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07/29/10--01027--001 **950.00

07/08/10--01030--006 **78.75

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 JUL 28 PM 3:44

W1-32750

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COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Unified Capital Solutions, Inc.
Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Harry L. Beard

Name of Person

Unified Capital Solutions, Inc.

Firm/Company

600 Vine Street, Suite 1804

Address

Cincinnati, Ohio 45202

City/State and Zip code

HARRY@UNIFIEDCAPITAL.NET

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Harry Beard

Name of Person

at (513) 404-8309

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee ☒ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 12, 2010

HARRY L BEARD
600 VINE STREET SUITE 1804
CINCINNATI, OH 45202

SUBJECT: UNIFIED CAPITAL SOLUTIONS, INC.
Ref. Number: W10000032750

We have received your document for UNIFIED CAPITAL SOLUTIONS, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$950.00.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

Please return the corrected original and one copy of 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) 245-6931.

Becky McKnight
Regulatory Specialist II
New Filing Section

Letter Number: 110A00016878

**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.*

1. **UNIFIED CAPITAL SOLUTIONS, INC.**

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. **OHIO** 3. **31-1778214**
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. **06.06.2001** 5. **PERPETUAL**
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. **10.2007**
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. **187 E. CRYSTAL LAKE AVE., SUITE 1009, LAKE MARY, FLORIDA 32746**
(Principal office address)
600 VINE STREET, SUITE 1804, CINCINNATI, OHIO 45202
(Current mailing address)

8. **EMPLOYEE BENEFITS / SALES & SERVICE**

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

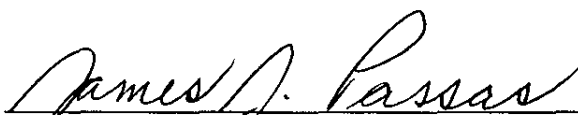
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: **JAMES J. PASSAS**
Office Address: **187 E. CRYSTAL LAKE AVE., SUITE 1009**
LAKE MARY, Florida **32746**
(City) (Zip code)

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10. 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)

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: HAROLD LOEWENSTINE JR.

Address: 550 E. 4TH. STREET
CINCINNATI, OHIO 45202

Vice Chairman: NONE

Address: _____

Director: DONALD SCHMIDT

Address: 11795 WINTHROP LANE
CINCINNATI, OHIO 45249

Director: JAMES S. KILCOIN

Address: 51593 HIGHLAND SHORES DR.
GRANGER, INDIANA 46530

B. OFFICERS

President: DANIEL W. SMITH JR.

Address: 900 ADAMS CROSSING
CINCINNATI, OHIO 45202

Vice President: DONALD SCHMIDT

Address: 11795 WINTHROP LANE
CINCINNATI, OHIO 45249

Secretary: HARRY L. BEARD

Address: 618 TERRACE VIEW DRIVE CINCINNATI, OHIO 45255

Treasurer: HARRY L. BEARD

Address: 618 TERRACE VIEW DRIVE, CINCINNATI, OHIO 45255

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. [Signature] C.E.O.

(Signature of Director or Officer listed in number 12 of the application)

14. HAROLD LOEWENSTINE, JR., C.E.O.

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

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

*I, Jennifer Brunner, 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 **UNIFIED CAPITAL SOLUTIONS, INC.**, an Ohio corporation, Charter No. 1233953, having its principal location in Cincinnati, County of Hamilton, was incorporated on June 06, 2001 and is currently in **GOOD STANDING** upon the records of this office.*

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*Witness my hand and the seal of the
Secretary of State at Columbus, Ohio
this 30th day of June, A.D. 2010*

A handwritten signature in cursive script, reading "Jennifer Brunner".

Ohio Secretary of State

Validation Number: V2010181J0D82A