

F12888805067

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

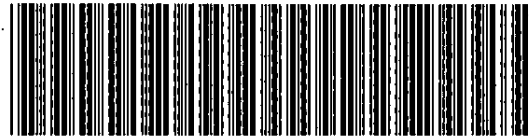
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700239138107

09/04/12--01036--015 **70.00

FILED
12 DEC 18 AM 11:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRS
12/18

1112 115453

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Cohesion Corporation

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:

Mary Jo Riesenber

Name of Person

Cohesion Corporation

Firm/Company

8044 Montgomery Rd., Suite 250

Address

Cincinnati, OH 45236

City/State and Zip code

mriesenberg@cohesion.com

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

For further information concerning this matter, please call:

Mary Jo Riesenber

Name of Person

at (513) 587-7700 ext. 7718

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

FILED
18 APR 16

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

September 5, 2012

MARY JO RIESENBERG
COHESION CORPORATION
8044 MONTGOMERY RD., SUITE 250
CINCINNATI, OH 45236

SUBJECT: COHESION TECHNOLOGY SERVICES
Ref. Number: W12000045853

We have received your document for COHESION TECHNOLOGY SERVICES and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Ruby Dunlap
Regulatory Specialist II

Letter Number: 012A00022465

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. Cohesion Corporation

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

Cohesion Technology Services, INC.

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

2. Ohio

(State or country under the law of which it is incorporated)

3. 20-8292904

(FEI number, if applicable)

4. 01/12/2007

(Date of incorporation)

5. Perpetual

(Duration; Year corp. will cease to exist or "perpetual")

6. N/A

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

7. 8044 Montgomery Rd., Suite 250, Cincinnati, OH 45263

(Principal office address)

Same as above.

(Current mailing address)

8. Technology Consulting Services

(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: NRAI Services, Inc.

Office Address: 515 East Park Avenue

Tallahassee, Florida 32301

(City) (Zip code)

FILED 12 DEC 18 AM 11:16 SECRETARY OF STATE TALLAHASSEE, FLORIDA

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.

NRAI SERVICES, INC.

By: Jessica Metzger

Jessica Metzger, Assistant Secretary

(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

FILED

12 DEC 18 AM 11:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: John M. Owens

Address: 3665 Emerald Isle

Deerfield Township, OH 45040

Vice President: Garry Phillips

Address: 3664 Cooper Road

Blue Ash, OH 45242

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

13. 

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she 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.

14. Garry Phillips, Executive VP and CFO

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

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

FILED

12 DEC 18 AM 11:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 COHESION CORPORATION, an Ohio corporation, Charter No. 1671943, having its principal location in Cincinnati, County of Hamilton, was incorporated on January 12, 2007 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 17th day of December, A.D. 2012

Jon Husted

Ohio Secretary of State