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COVER LETTER

TO: New Filing Section Division of Corporations		
NIM/ANI Ina		
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Tunio di corpora	non must morado surrix	
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation "Certificate of Existence," or "Certificate of Good above referenced foreign corporation to transact but	Standing" and check are submitted to	
Please return all correspondence concerning this ma	atter to the following:	
Janelle Bieniecki		
Name	of Person	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
NWAN, Inc.		
Firm/C	Company	
14955 W. Sprague Rd. #200		
Strongsville Ohio 44136	ddress	
City/Sta	te and Zip code	
jbieniecki@nwan.com		25 Q
E-mail address: (to be us	ed for future annual report notificati	on) 🚡
For further information concerning this matter, plea	se call:	22 A
Janelle Bieniecki at (877	222-1645 ext 512 ea Code & Daytime Telephone Num	28 STATE
Name of Person Ar	ea Code & Daytime Telephone Num	iber Smi S
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 Corporatio P.O. Box 6327 Tallahassee, FL 32314	ns .
Enclosed is a check for the following amount:		
☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status	Certified Copy Ce	7.50 Filing Fee, entificate of Status & entified Copy

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.

N/A				
(If name unavailab	le in Florida, enter alternate corporate name	adopted for the purpose of transacting business in Florida))	
Ohio	3	46-1273738		
(State or country un	nder the law of which it is incorporated)	(FEI number, if applicable)		
10-26-12	5.	perpetual		
,	f incorporation)	(Duration: Year corp. will cease to exist or "perpetual")	_	
None				
	(Date first transacted business	in Florida, if prior to registration) 1502, F.S., to determine penalty liability)	_	
14955 W 9	Sprague Rd. #200 Strong	• • • • • • • • • • • • • • • • • • • •		
. 14000 17. ((Principal office add		_	
		aress)		
PO Box 30		oress)		
PO Box 30	308 Cleveland OH 44130 (Current mailing add		_	
PO Box 30	308 Cleveland OH 44130 (Current mailing add		_	
All lawful b	308 Cleveland OH 44130 (Current mailing add	dress)	- - සා	
All lawful k	308 Cleveland OH 44130 (Current mailing add	ountry to be carried out in state of Florida)	13.11)	
All lawful k	Current mailing add OUSINESS of corporation authorized in home state or co	ountry to be carried out in state of Florida) O. Box NOT acceptable)	13 .11,9 24	
All lawful k (Purpose(s) of	Current mailing add Ousiness of corporation authorized in home state or caddress of Florida registered agent: (P.	ountry to be carried out in state of Florida) O. Box NOT acceptable)	2	
All lawful to (Purpose(s) of Name and street Name:	Current mailing add Ousiness of corporation authorized in home state or considerate agent: (P. Corporation Service Comp	ountry to be carried out in state of Florida) O. Box NOT acceptable)	13.11.W 2 t. AM 11:06	

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.

Sylvia Sanchez Schuler Assistant Vice President

(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: None Vice Chairman: None Director: Kelly Price Address: 14955 W. Sprague Rd. #200 Strongsville OH 44136 Director: Kirtland Frye 14955 W. Sprague Rd. #200 Strongsville OH 44136 B. OFFICERS President: Kelly Price Address: 14955 W. Sprague Rd. #200 Strongsville OH 44136 Vice President: Kirtland Frye Address: 14955 W. Sprague Rd. #200 Strongsville OH 44136 Secretary: Mary Zimmerman 14955 W. Sprague Rd. #200 Strongsville OH 44136 Treasurer: Kelly Price 14955 W. Sprague Rd. #200 Strongsville OH 44136 NOTE: If necessary you may attach an addendum to the application listing additional officers and/or directors. 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. Kelly Price, President

SUMPLAMINO

UNITED STATES OF AMERICA STATE OF OHIO OFFICE OF THE SECRETARY OF STATE

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 NWAN, INC., an Ohio Corporation, Charter No. 2146649, having its principal location in Strongsville, County of Cuyahoga, was incorporated on October 26, 2012, and is currently in GOOD STANDING upon the records of this office.

SECTOR OF STATE

Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 8th day of May, A.D. 2013.

Ohio Secretary of State



Validation Number: 201312700734