

6/5/2017

Division of Corporations

Fin 00002668

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (512)418-6949  
Fax Number : (954)208-0845

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

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DIVISION OF CORPORATIONS  
17 JUN 12 PM 5:13

**FOREIGN PROFIT/NONPROFIT CORPORATION  
OHCSO, INC.**

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$70.00

Electronic Filing Menu

Corporate Filing Menu

M. MILLIGAN  
JUN 13 2017

**Milligan, Michelle**

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**From:** send@mail.efax.com  
**Sent:** Monday, June 12, 2017 12:06 PM  
**To:** Duffy, Patrick  
**Subject:** Successful transmission to 18506176383. Re: OHCSO, Inc.  
**Attachments:** 20170612\_090621309\_FAX\_1749285872.tif

17 JUN 12 PM 5:13  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

Dear Kimberly Laughrey,

Re: OHCSO, Inc.

The 1 page fax you sent through eFax Solutions to 18506176383 was successfully transmitted at 2017-06-12 16:06:18 (GMT).

The length of transmission was 42 seconds.

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Best Regards,

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Customer Service

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Tel: 1-323-817-3202

Email: [corporatesupport@mail.efax.com](mailto:corporatesupport@mail.efax.com)

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** OHCSO, 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:

HEIDI KIGHT

Name of Person  
ARNSTEIN & LEHR LLP

Firm/Company  
161 N. CLARK STREET, SUITE 4200

Address  
CHICAGO, ILLINOIS 60601

City/State and Zip code  
HAKIGHT@ARNSTEIN.COM

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

For further information concerning this matter, please call:

HEIDI KIGHT	312	876-7835
Name of Person	Area Code	Daytime Telephone Number

**STREET/COURIER ADDRESS:**

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

**MAILING ADDRESS:**

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

Enclosed is a check for the following amount:

- |   |  |  |   |
|---|--|--|---|
| <input type="checkbox"/> \$70.00 Filing Fee | <input type="checkbox"/> \$78.75 Filing Fee &<br>Certificate of Status | <input checked="" type="checkbox"/> \$78.75 Filing Fee &<br>Certified Copy | <input type="checkbox"/> \$87.50 Filing Fee,<br>Certificate of Status &<br>Certified 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.*

1. OHCSO, 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)

OHIO

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

3. (FEI number, if applicable)

2/13/2014

PERPETUAL

4. (Date of incorporation)

5. (Date of duration, if other than perpetual)

DATE OF FILING.

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

2400 W. DEVON AVE., CHICAGO, ILLINOIS 60659

7. (Principal office address)

2400 W. DEVON AVE., CHICAGO, ILLINOIS 60659

(Current mailing address, if different)

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

Name: Bruce H. Balonick

Office Address: 200 S. Biscayne Blvd., Ste 3600

Miami

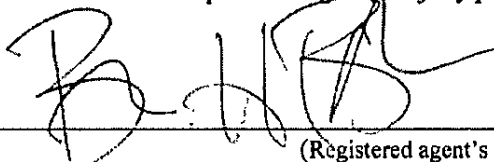
33131

(City)

, Florida (Zip code)

9. 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)

10. 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.

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11. Names and business addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: IRVING BARR

Address: 2400 W. DEVON AVE., CHICAGO, ILLINOIS 60659

\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: IRA FELNER

Address: 2400 W. DEVON AVE., CHICAGO, ILLINOIS 60659

\_\_\_\_\_

.....CEO.. IRVING BARR

Address: 2400 W. DEVON AVE., CHICAGO, ILLINOIS 60659

\_\_\_\_\_

Secretary: IRVING BARR

Address: 2400 W. DEVON AVE., CHICAGO, ILLINOIS 60659

\_\_\_\_\_

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

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

12. \_\_\_\_\_

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 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.

13. \_\_\_\_\_

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

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 OHCSO, INC., an Ohio corporation, Charter No. 2268594, having its principal location in Columbus, County of Franklin, was incorporated on February 13, 2014 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 5th day of June, A.D. 2017.*

*Jon Husted*

Ohio Secretary of State

Validation Number: 201715602640