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COVER LETTER

Division of Corpor			
SUBJECT: Scott rt, Rupe	ort Co., L.P.A.	on - must include suffix	
	rame of corporate	m - must mentae sam.	
Dear Sir or Madam:			
"Certificate of Existence."	by Foreign Corporation for or "Certificate of Good State orporation to transact busin	or Authorization to Transact Business anding" and check are submitted to reness in Florida.	in Florida." gister the
Please return all correspon	dence concerning this matt	er to the following:	
Scott H. Ruport			
	Name c	of Person	
Scott H. Ruport Co., L.P.A.			
	Firm/Co	ompany	
4040 Embassy Parkway, Sui	te 260	<u></u>	
	Ado	dress	
Akron, Ohio 44333			
	City/State	e and Zip code	25
sruport@ruportlaw.com			
	E-mail address: (to be use	d for future annual report notification	2019 BEC 23
For further information co	oncerning this matter, pleas	e call:	
Constant Decisions	331	0 701-5688	<u>မ</u>
Scott H. Ruport	at (at C)	ယ္ ner ဟ
Name of Person	Meac	ode Daytine retephone ream	ယ်
STREET/COUR Registration Section Division of Corporate Centre of Tal 2415 N. Monroe Tallahassee, FL.	ion prations Hahassee Street, Suite 810	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Enclosed is a check for th Please make check payable ☐ \$70.00 Filing Fee	ne following amount: to: FLORIDA DEPARTME \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & S87. Certified Copy Cert	50 Filing Fee, tificate of Status & tified 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.

Enter name of co Inc.," "Co.," "Co	rporation; must include "INCORPORATED," rp," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATION,"		
If name unavaila	ble in Florida, enter alternate corporate name ac	dopted for the purpose of transacting bus	iness in Florida)	
Ohio 3		34-1493020		
Ohio 3. $\frac{3}{\text{(State or country under the law of which it is incorporated)}}$		(FEI number, if applicable)		
10/22/85 5. (Date of incorporation)		(Date of duration, if other than perpetual)		
040 Embassy Pa	rkway, Suite 260, Akron, Ohio 44333	02, F.S., to determine penalty liability) se street address)		
-	rkway, Suite 260, Akron, Ohio 44333 (Principal offic	re <u>street</u> address)		
	rkway, Suite 260, Akron, Ohio 44333 (Principal offic		20151	
Same as above	rkway, Suite 260, Akron, Ohio 44333 (Principal offic	g address, if different)	2015 DEC	
Same as above	(Current mailing	g address, if different)	2015 DEC 23	
Same as above Name and strey Name:	(Principal office) (Current mailing) (a address of Florida registered agent: (P.O.)	g address, if different)	P	
Same as above Name and stree	(Principal office) (Current mailing) (Paraddress of Florida registered agent: (P.O.) Scott H. Ruport	g address, if different) Box NOT acceptable)		

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.

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.

A. DIRECTORS	2 0	_	Linda S	S. Ruport
□Chairman	Scott H. Ruport Name:	□Chairman	Name:	<u>·</u>
□Vice Chairman		□Vice Chairman		
Director	C/O 4040 Embassy Parkway, Suite 260	□Director	C/O 4040 Embassy Parkway, Suite 260 Akron, Ohio 44333	
President Akron, Ohio 44333		□President	Akron, Omo	44333
□Vice President		□Vice President		
□Secretary	□Treasurer	Secretary		□Treasurer
Other	□Other	□Other		□Other
□Chairman	Name:	□Chairman	Name:	
□Vice Chairman	Address:	□Vice Chairman	Address:	
□!Director		□Director		
□President		□President		
□Vice President		□Vice President		
☐ Secretary	□Treasurer	Secretary		□)Treasurer
□Other	Other	Other		Other
□Chairman	Name:	☐Chairman	Name:	27.13
□Vice Chairmar	n Address:	□Vice Chairman	Address:	
□Director		□Director		, ,
□President		□President		70
□Vice President		□Vice President		
☐ Secretary	□Treasurer	☐ Secretary		్రు □Treasurer
Other		□Other		□Other
Important Notice individuals may	e: Use an attachment to report more than six (6). be added to the index when filing your Florida D	epartment of State Annual F	Report form.	
12	Signature of	irector or Officer		

13. Scott H. Ruport, 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, Frank LaRose, 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 SCOTT H. RUPORT CO., L.P.A., an Ohio Professional Corporation, Charter No. 664778, having its principal location in Akron, County of Summit, was incorporated on October 22, 1985, 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 26th day of November, A.D. 2019.

Ohio Secretary of State

Validation Number: 201933000948