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COVER LETTER

TO: Registration Section Division of Corporation	าร			
SUBJECT: Steed Hammond F	Paul. Inc.			
	Name of corporation	ı - must include suffix		_
Dear Sir or Madam:				
The enclosed "Application by F "Certificate of Existence," or "C above referenced foreign corpo	Certificate of Good Star	nding" and check are sub	ct Business in Flo omitted to register	orida," the
Please return all correspondence	e concerning this matter	r to the following:		
Susan Woollum				
	Name of	Person		
Steed Hammond Paul, Inc.				
	Firm/Con	npany		
312 Plum Street, Ste 700				
	Addr	ess		
Cincinnati, OH 45202				
	City/State a	nd Zip code		
swoollum@shp.com				
E-ma	iil address: (to be used	for future annual report i	notification)	
For further information concern	ing this matter, please of	rall:		
Susan Woollum	at (381-2112		7070 51
Name of Person	Area Cod		hone Number	- ':
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		Registration S Division of C P.O. Box 632	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
<u> </u>	DRIDA DEPARTMENT	OF STATE \$78,75 Filing Fee & Certified Copy	☐ \$87.50 Filii Certificate Certified C	of Status &

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. Steed Hammon	d Paul, Inc.		
(Enter name of c	corporation; must include "INCORPORATED," Forp," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATION,"	•
SHP			
(If name unavail	able in Florida, enter alternate corporate name ac	lopted for the purpose of transacting	business in Florida)
2. Ohio	3. 31-0997825		
(State or countr 4.	ry under the law of which it is incorporated)	(FEI number, if appl	
	of incorporation)	(Date of duration, if other tha	in perpetual)
6. N/A			
	(Date first transacted business in I (SEE SECTIONS 607.1501 & 607.150	Florida, if prior to registration) 2, F.S., to determine penalty liability	
7. 312 Plum Street.	Ste 700. Cincinnati, OH 45202		
	(Principal office	street address)	
N/A 			
	(Current mailing	address, if different)	020 7
8. Name and stree	et address of Florida registered agent: (P.O.	Box NOT acceptable)	
Name:	InCorp Services, Inc.		10 /
Office Address:	17888 67th Court North		J.: 101J
	Loxahatchee	, Florida	-
	(City)	(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.

Karen Gibson on behalf of InCorp Services, Inc.

(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.

A. DIRECTORS				
□Chairman	Name: See attachment	□ 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:	<u> </u>
□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:	~
□Vice Chairman	Address:	□Vice Chairman	Address:	2020 :
□Director		□Director		
□President		□President		
□Vice President		□Vice President		· · · · · · · · · · · · · · · · · · ·
□Secretary	□Treasurer	□Secretary		☐Treasurer
□Other	□Other	□Other		□Other
Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form. 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.

, Joanne Scott, Vice President

11. Directors

	Name	No. & Street	City	State	Zip
President	Lauren Della Bella	312 Plum St, Ste 700	Cincinnati	ОН	45202
Executive Vice President	Thomas Fernandez	312 Plum St, Ste 700	Cincinnati	ОН	45202
Vice President	Todd Thackery	312 Plum St, Ste 700	Cincinnati	ОН	45202
Vice President	Ronald Hicks	312 Plum St, Ste 700	Cincinnati	ОН	45202
Vice President	Richard Thomas	312 Plum St, Ste 700	Cincinnati	ОН	45202
Vice President	Joanne Scott	312 Plum St, Ste 700	Cincinnati	ОН	45202
Vice President	Charles Jahnigen	312 Plum St, Ste 700	Cincinnati	ОН	45202
Vice President	Jeffrey Sackenheim	312 Plum St, Ste 700	Cincinnati	ОН	45202
Vice President	Michael Parkinson	312 Plum St, Ste 700	Cincinnati	ОН	45202
Vice President	Brandi Bresser	312 Plum St. Ste 700	Cincinnati	OH	45202

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 STEED HAMMOND PAUL, INC., an Ohio corporation, Charter No. 567838, having its principal location in Hamilton, County of Butler, was incorporated on January 2, 1981 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 August, A.D. 2020.

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Ohio Secretary of State

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Validation Number: 202021801294



July 23, 2020

SUSAN WOOLLUM 312 PLUM STREET STE 700 CINCINNATI, OH 45202 US

SUBJECT: STEED HAMMOND PAUL, INC.

Ref. Number: W20000078155

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

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

Please return 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) 245-6051.

Sharon D Franklin Regulatory Specialist II

Letter Number: 220A00013866

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