C2200005976

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



100393949771

 $(\sqrt{\eta}/(2\omega_0)_{\mathbb{Z}_2^{n+1}}) = (\eta/2)^n = (\sqrt{\eta}/(2\omega_0)_{\mathbb{Z}_2^{n+1}})^n$

WZS. 16 FH2: 23

S. FRANKLIN SFP 25 2022

COVER LETTER

•	stration Section ion of Corporations				
SUBJECT:	Harris Design S	ervices, I	nc.		
3013013			- must include suffix		
Dear Sir or M	ladam:				
"Certificate o	"Application by Foreign Co d'Existence," or "Certificate need foreign corporation to t	of Good Stand	ding" and check are subm		
Please return Bruce A	all correspondence concern . Harris	ing this matter	to the following:		
		Name of I			
Harris D	esign Services, l			S	
005.0.1	1.0	Firm/Comp	pany		32
985 Schrock Road, Suite 200					
Columb	us, OH 43229	Addre	SS		
COlumb	<u>us, OTT 43223</u>	City/State ar	nd Zip code		<u> </u>
jharris@	harrisaia.com				7: 5:
	E-mail address	s: (to be used fo	or future annual report no	otification)	F::12: 23
For further in	formation concerning this n	natter, please ca	all:		(A)
Bruce A	Harris	at (614			
Nam	e of Person	Area Code	Daytime Teleph	one Number	
Regis Divis The C 2415	EET/COURIER ADDRES stration Section sion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 hassee, FL 32303		MAILING AI Registration Se Division of Co P.O. Box 6327 Tallahassee, FI	ection rporations	
Enclosed is a Please make of \$70.00 Fil	check for the following amoreck payable to: FLORIDA Ding Fee	EPARTMENT og Fee & 🗆 🗆	OF STATE \$78.75 Filing Fee & Certified Copy	□ \$87.50 Filing Certificate o Certified Co	f 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.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp." "Inc.," "Co.," "Corp." "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 (State or country under the law of which it is incorporated) (Date of country under the law of which it is incorporated) (Date of duration, if other than perpetual) (Date of incorporation) (Date of duration, if other than perpetual) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 985 Schrock Road Ste 200 Columbus OH 43229 (Principal office street address) PO Box 2758, Westerville, OH 43086 (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Registered Agents Inc. 7901 4th St N STE 300 St. Petersburg (City) 9. Registered agent's acceptance:	1. Harris Des	ign Services, Inc.		
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) Ohio State or country under the law of which it is incorporated) (PEI number, if applicable) June 4, 1997 (Date of incorporation) (Date of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 985 Schrock Road Ste 200 Columbus OH 43229 (Principal office street address) PO Box 2758, Westerville, OH 43086 (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Registered Agents Inc. 7901 4th St N STE 300 St. Petersburg (City) Florida 33702 (Zip code)			"COMPANY," "CORPORATION,"	
2. Ohio (State or country under the law of which it is incorporated) 4. June 4, 1997 (Date of incorporation) (Date of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 7. 985 Schrock Road Ste 200 Columbus OH 43229 (Principal office street address) PO Box 2758, Westerville, OH 43086 (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Registered Agents Inc. 7901 4th St N STE 300 St. Petersburg (City) Florida 33702 (Zip code)				
2. Ohio (State or country under the law of which it is incorporated) 4. June 4, 1997 (Date of incorporation) (Date of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 7. 985 Schrock Road Ste 200 Columbus OH 43229 (Principal office street address) PO Box 2758, Westerville, OH 43086 (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Registered Agents Inc. 7901 4th St N STE 300 St. Petersburg (City) Florida 33702 (Zip code)				
(State or country under the law of which it is incorporated) June 4, 1997 (Date of incorporation) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 7. 985 Schrock Road Ste 200 Columbus OH 43229 (Principal office street address) PO Box 2758, Westerville, OH 43086 (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Registered Agents Inc. 7901 4th St N STE 300 St. Petersburg (City) Florida 33702 (Zip code)		ible in Florida, enter alternate corporate name ad	opted for the purpose of transacting busi	ness in Florida)
4. June 4, 1997 (Date of incorporation) (Date of duration, if other than 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. 985 Schrock Road Ste 200 Columbus OH 43229 (Principal office street address) PO Box 2758, Westerville, OH 43086 (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Registered Agents Inc. 7901 4th St N STE 300 St. Petersburg (City) Florida 33702 (Zip code)	_{2.} Ohio	3		
(Date of incorporation) (Date of duration, if other than perpetual) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 7. 985 Schrock Road Ste 200 Columbus OH 43229 (Principal office street address) PO Box 2758, Westerville, OH 43086 (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Registered Agents Inc. 7901 4th St N STE 300 St. Petersburg (City) Florida 33702 (Zip code)			(FEI number, if applicab	le)
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 7. 985 Schrock Road Ste 200 Columbus OH 43229 (Principal office street address) PO Box 2758, Westerville, OH 43086 (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Registered Agents Inc. 7901 4th St N STE 300 St. Petersburg (City) Florida 33702 (Zip code)	T			
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 7. 985 Schrock Road Ste 200 Columbus OH 43229 (Principal office street address) PO Box 2758, Westerville, OH 43086 (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Registered Agents Inc. 7901 4th St N STE 300 St. Petersburg (City) Florida 33702 (Zip code)		of incorporation)	(Date of duration, if other than pe	erpetual)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 7. 985 Schrock Road Ste 200 Columbus OH 43229 (Principal office street address) PO Box 2758, Westerville, OH 43086 (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Registered Agents Inc. 7901 4th St N STE 300 St. Petersburg (City) Florida 33702 (Zip code)	_{6.} <u>n</u> /a			
(Principal office street address) PO Box 2758, Westerville, OH 43086 (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Registered Agents Inc. 7901 4th St N STE 300 St. Petersburg (City) Florida 33702 (Zip code)				
PO Box 2758, Westerville, OH 43086 (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Registered Agents Inc. 7901 4th St N STE 300 St. Petersburg (City) Florida 33702 (Zip code)	7, 985 Schrod	ck Road Ste 200 Columbus C	OH 43229	
(Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Registered Agents Inc. 7901 4th St N STE 300 St. Petersburg (City) Florida 33702 (Zip code)	··-	·		
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Registered Agents Inc. 7901 4th St N STE 300 St. Petersburg (City) St. Policida (Zip code)	PO Box 27	758, Westerville, OH 43086		
Name: Registered Agents Inc. 7901 4th St N STE 300 St. Petersburg (City) Registered Agents Inc. 7901 4th St N STE 300 (City) Registered Agents Inc. 7901 4th St N STE 300 (City) Registered Agents Inc. 7901 4th St N STE 300		(Current mailing	address, if different)	
Office Address: Registered Agents Inc. 7901 4th St N STE 300 St. Petersburg (City) St. Plorida 33702 (Zip code)				191
Office Address: 7901 4th St N STE 300 St. Petersburg (City) St. Potentia 33702 (Zip code)	8. Name and stree	t address of Florida registered agent: (P.O.	Box <u>NOT</u> acceptable)	200
Office Address: 7901 4th St N STE 300 St. Petersburg Florida 33702 St. (City) (Zip code) 2	Name:	Registered Agents Inc.		
St. Petersburg (City) St. Petersburg (City) (Zip code)	Office Address:	7901 4th St N STE 300		-17
(City) (Zip code)		St. Petersburg	33702	1/2:
9. Registered agent's acceptance:		(City)	(Zip code)	<u>လ</u> ယ
9. Registered agent's acceptance.	O. Dogistanad age	-4?:		
Having been named as registered agent and to accept service of process for the above stated corporation at the place			of process for the above stated corp	oration at the place
designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity.	designated in this	application, I hereby accept the appointme	nt as registered agent and agree to o	act in this capacity. I
further agree to comply with the provisions of all statutes relative to the proper and complete performance of my dut and I am familiar with and accept the obligations of my position as registered agent.	jurther agree to co and I am familiar	ompty with the provisions of all statutes reli- with and accept the obligations of my posi-	anve to the proper and complete per tion as registered agent.	jormance oj m _i , aata
	······ •	, , , , ,		
R.W. N		R.W. H		
(Registered agent's signature)		(Registered agent's view	nature)	

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: Bruce A. Harris	□Chairman	Name:		
□Vice Chairman	Address: 9773 Covan Drive	□Vice Chairman	Address:		
□Director	Westerville, OH 43082	□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:		
□Director		□Director			
□President		□President			
□Vice President		□Vice President		2(2)	
□Secretary	□Treasurer	□Secretary		□Treasurér	
□Other	□Other	□Other		□Other <u> </u>	
☐Chairman	Name:	□Chairman	Name:	P", 12:	
	Address:	□Vice Chairman		(3)	
Director		□Director			
□President		□President			
□Vice President		□Vice President			
☐ Secretary	☐ Treasurer	☐ Secretary		□Treasurer	
□Other	Other	□()ther	<u>.</u>	□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.

Bruce A. Harris, Officer

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 HARRIS DESIGN SERVICES, INC., an Ohio corporation, Charter No. 981926, having its principal location in Columbus, County of Franklin, was incorporated on June 4, 1997 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 13th day of September, A.D. 2022.

Ohio Secretary of State

I tone

Validation Number: 202225602916