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DIVISION OF REVENUE

CT CORPORATION SYSTEM
Requestor's Name
660 EAST JEFFERSON STREET
Address
TALLAHASSEE FL 32301 222-1092
City State Zip Phone

900001609189
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CORPORATION(S) NAME

CRSE SPV 20449 T

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TALLAHASSEE, FLORIDA

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| <input checked="" type="checkbox"/> Profit | <input type="checkbox"/> Amendment | <input type="checkbox"/> Merger |
| <input type="checkbox"/> NonProfit | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark |
| <input type="checkbox"/> Limited Liability Company | <input type="checkbox"/> Annual Report | <input type="checkbox"/> Other |
| <input checked="" type="checkbox"/> Foreign | <input type="checkbox"/> Reservation | <input type="checkbox"/> Change of R.A. |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Photo Copies | <input type="checkbox"/> Fictitious name Filing |
| <input type="checkbox"/> Reinstatement | <input checked="" type="checkbox"/> CUS | |
| <input checked="" type="checkbox"/> Certified Copy | <input type="checkbox"/> Call if Problem | <input type="checkbox"/> After 4:30 |
| <input type="checkbox"/> Call When Ready | <input type="checkbox"/> Will Wait | <input checked="" type="checkbox"/> Pick Up |
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**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION
TRANSACTION BUSINESS IN FLORIDA**

**IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS
SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACTION BUSINESS IN THE
STATE OF FLORIDA:**

1. CRSI SPV 20449, INC.
(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. Delaware
(State or country under the law of which it is incorporated)
3. Pending
(FEI number, if applicable)
4. 10 / 03 / 95
(Date of Incorporation)
5. Perpetual
(Duration: Year corp. will cease to exist or "perpetual")
6. Upon qualification
(Date first transacted business in Florida. (See sections 607.1501, 607.1502 and 817.156, F.S.))
7. 6954 Americana Parkway
Reynoldsburg, Ohio 43068
(Current mailing address)
8. To acquire, own and hold a general partnership interest in a limited partnership
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent:

Name: C T CORPORATION SYSTEM

Office Address: c/o C T Corporation System, 1200 South Pine Island Road

Plantation, Florida, 33324
(Zip Code)

10. Registered agent 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.

C T CORPORATION SYSTEM

(Registered agent's signature) (Officer)

Gil S. Apelis, Asst. Secretary

(Type Name and Title of Officer)

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 addresses of officers and/or directors:

A. DIRECTORS

Chairman: See Exhibit "A"

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

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TALLAHASSEE, FLORIDA

B. OFFICERS

President: See Exhibit "A"

Address: _____

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

13. _____

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. James H. Bownas, Vice President

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

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EXHIBIT 'A'**OFFICERS**

NAME	OFFICE	ADDRESS
Robert J. Weiler	President	41 South High Street Columbus, Ohio 43215
David P. Blackmore	Vice President and Treasurer	6954 Americana Parkway Reynoldsburg, Ohio 43068
James H. Bownas	Vice President and Secretary	6954 Americana Parkway Reynoldsburg, Ohio 43068
Michael F. Carbone	Vice President	6954 Americana Parkway Reynoldsburg, Ohio 43068
Robert E. Pausch	Vice President	6954 Americana Parkway Reynoldsburg, Ohio 43068
Thomas Trubiana	Vice President	6954 Americana Parkway Reynoldsburg, Ohio 43068
David E. Williams	Vice President	6954 Americana Parkway Reynoldsburg, Ohio 43068
Dain Akin	Assistant Secretary	6954 Americana Parkway Reynoldsburg, Ohio 43068
Ronald P. Koegler	Assistant Secretary	6954 Americana Parkway Reynoldsburg, Ohio 43068
Michael K. L. Wager	Assistant Secretary	2300 BP American Building 200 Public Square Cleveland, Ohio 44114

DIRECTORS

NAME	ADDRESS
James H. Bownas	6954 Americana Parkway Reynoldsburg, Ohio 43068
Michael F. Carbone	6954 Americana Parkway Reynoldsburg, Ohio 43068
Robert E. Pausch	6954 Americana Parkway Reynoldsburg, Ohio 43068
Mark D. Thompson	600 Superior Avenue, NE Cleveland, Ohio 44114
Thomas Trubiana	6954 Americana Parkway Reynoldsburg, Ohio 43068

Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CRSI SPV 20449, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FOURTH DAY OF OCTOBER, A.D. 1995.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Edward J. Freel

Edward J. Freel, Secretary of State

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AUTHENTICATION:

7663842

DATE:

10-04-95