

L150000062863

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

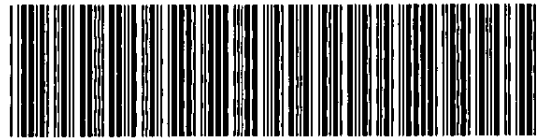
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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RECEIVED  
15 APR -9 PM 3:44  
DIVISION OF CORPORATE  
REGISTRATION  
TALLAHASSEE, FLORIDA  
FILED  
15 APR -9 PM 12:20

APR 10 2015

April 9, 2015

Secretary of State, Florida  
2661 Executive Circle Center  
Tallahassee FL 32301

Re: Order #: 9508737 SO  
Customer Reference 1: 38250-9  
Customer Reference 2:

Dear Secretary of State, Florida :

Please obtain the following:

Keystone Subsidiary LLC (FL)  
Formation  
Florida

Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

If for any reason the enclosed cannot be processed upon receipt, please contact the undersigned immediately at (850) 222-1092 .

Thank you very much for your help.

Sincerely,

Connie R Bryan  
Senior Fulfillment Specialist  
Connie.Bryan@wolterskluwer.com

RECEIVED  
15 APR -9 PM 3:44  
DIVISION OF CORPORATION

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Keystone Subsidiary LLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

25700 Science Park Drive  
Landmark Centre, Suite 365  
Beachwood, OH 44122

Mailing Address:

25700 Science Park Drive  
Landmark Centre, Suite 365  
Beachwood, OH 44122

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

CT Corporation System  
Name  
1200 South Pine Island Road  
Florida street address (P.O. Box **NOT** acceptable)  
Plantation Fl. 33324  
City Zip

*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.*

Kristin Bolden

Registered Agent's Signature (REQUIRED)

Kristin Bolden  
Assistant Secretary

(CONTINUED)

FILED  
15 APR - 9 PM 12:20  
CLERK OF CIRCUIT COURT  
JACKSONVILLE, FLORIDA

**ARTICLE IV-**

The name and address of each person authorized to manage and control the Limited Liability Company:

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

MGR

MGR

MGR

**Name and Address:**

David Goldberg

25700 Science Park Drive

Beachwood, OH 44122

Robert Goldberg

25700 Science Park Drive

Beachwood, OH 44122

Gerald Goldberg

25700 Science Park Drive

Beachwood, OH 44122

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**ARTICLE VI:** Other provisions, if any.

**REQUIRED SIGNATURE:**

  
\_\_\_\_\_  
*Signature of a member or an authorized representative of a member.*

(In accordance with section 605.0203 (1) (b) Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any 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.)

David Goldberg, a Manager

Typed or printed name of signee

**Filing Fees:**

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)