M03000002957

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							
D/							

Office Use Only



500022421345

03/08/08-01014--030 **125.00



Holland & Knight LLP Requester's Name 315 So. Calhoun Street Address 425-5675 City/State/Zip Phone #		<u>-</u>	03 SEP TO THE PLONGER	FILED FAS
		Offi	ce Use Only	
CORPORATION NAME(S) & DOCU	MENT NUMBE	R(S), (if kno	wn):	
1. Act Investment Group (Corporation Name)	, LLC (Docu	ment#)		and the second of the second o
2(Corporation Name)				=
(Corporation Name)	(Docu	ment #)		
3. (Corporation Name)	(Досц	ment#)		<u>.</u>
4		÷		
(Corporation Name)	(Docu	ment #)		,
☐ Walk in ☐ Pick up time _	••		Certified Copy	·
☐ Mail out ☐ Will wait	☐ Photocopy	_	Certificate of Status	
NEW FILINGS	AMENDME	INTS		
Profit	Amendn	nent		•
Not for Profit			Officer/Director	-
Limited Liability Domestication		of Registered		
Other	Merger	ion/Withdraw	/ai	
OTHER FILINGS	•	TION/OUAI	LIFICATION	
Annual Report	Foreign			-
☐ Fictitious Name		Partnership	· · · · ·	
•	Reinstate			
	☐ Tradema	ITK		v·
		r		
			Examiner's Initials	

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO RECISTER A FOREGO
LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1. Act Investment Group, LLC
(Name of foreign limited liability company)
2.Ohio 3. 31-1474141
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
4. June 13, 2001 (Date of Organization) 5. Perpetual (Duration: Year limited liability company will cease to exist or "perpetual")
6. Upon filing (Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.)
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.)
7. 7225 Colerain Avenue, Suite 12, Cincinnati, Ohio 45239
(Street address of principal office)
8. If limited liability company is a manager-managed company, check here
9. The name and usual business addresses of the managing members or managers are as follows:
Chad Evans - 7225 Colerain Avenue, Suite 12, Cincinnati, Ohio 45239
Thomas Miller - 7225 Colerain Avenue, Suite 12, Cincinnati, Ohio 45239
Anthony Stroud - 7225 Colerain Avenue, Suite 12, Cincinnati, Ohio 45239
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under eath of the translator must be submitted.)
11. Nature of business or purposes to be conducted or promoted in Florida:
Real Estate Investment
Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), F.S., the execution of this document constitutes

Typed or printed name of signee

Chad Evans, Manager

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES.

THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING

STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of	the Limited Liability Cor	mpany is:				
Act Investme	ent Group, LLC				· 	
2. The name and	d the Florida street addre	ss of the registere	ed agent and office are:	<u></u>		
Chad Evans (Name)						
		(Hanie)				
10234 Charleston Corner Road Florida street address (P.O. Box NOT ACCEPTABLE)						
	Tampa	FL (City/State Win)	33635			
		(City/State/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 608, F.S.

(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

United States of America State of Ohio Office of the Secretary of State

I, J. Kenneth Blackwell, 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 corporations; that said records show ACT INVESTMENT GROUP, LLC, an Ohio Limited Liability Company, Registration Number 1235696, was organized within the State of Ohio on June 13, 2001, is currently in FULL FORCE AND EFFECT upon the records of this office.



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 4th day of September, A.D. 2003

Ohio Secretary of State

Validation Number: V2003247S2771D