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(Re	questor's Name)				
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(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
(Bu	siness Entity Nam	ne)			
(Do	cument Number)				
Certified Copies	Certificates	of Status			
Special Instructions to	Filing Officer:				
		}			

Office Use Only



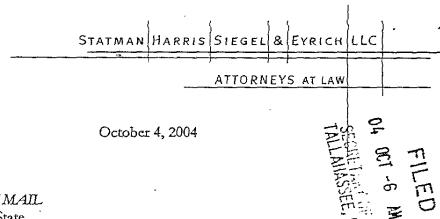
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THOMAS H. BERGMAN

CINCINNATI OFFICE 2900 Chemed Center 255 East Fifth Street Cincinnati, Ohio 45202 T 513.621.2666 F 513.345.8289

VIA OVERNIGHT MAIL Florida Secretary of State Registration Section Division of Corporations 409 East Gaines Street Tallahassee, FL 32399

WOY-37231

RE: Heritage Financial Solutions, LLC and Heritage Land Title, LLC -- Applications for foreign LLC

Dear Sir or Madam:

Enclosed are the following documents for the above referenced entities:

- 1) Heritage Financial Solutions, LLC Transmittal Letter; One (1) original and 1 copy of the Application by Foreign Limited Liability Company for Authorization to Transact Business in Michigan; One (1) Ohio Certificate of Good Standing for Heritage Financial Solutions, LLC; and our check in the amount of \$125.00 to cover the filing fee.
- 2) Heritage Land Title, LLC Transmittal Letter; One (1) original and 1 copy of the Application by Foreign Limited Liability Company for Authorization to Transact Business in Michigan; One (1) Ohio Certificate of Good Standing for Heritage Land Title, LLC; and our check in the amount of \$125.00 to cover the filing fee.

Please file these foreign applications and return the file-stamped copy to us at your convenience in the enclosed return envelope. Thank you for your assistance in this matter. If you have any questions, please let me know.

Sincerely,

Jill R. McGtail

Law Clerk

|skb Enclosures

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	-		٠	
SUBJECT: Heritage Financial Solutions, LLC				
(Name of Limite	ed Liability Company)			
The enclosed "Application by Foreign Limited Liabi Florida," Certificate of Existence, and check are sub- liability company to transact business in Florida	lity Company for Authorization to Transmitted to register the above referenced	nsact Bu foreign	usiness i limited	ir
Please return all correspondence concerning this mat	ter to the following:			
Thomas H. Bergman, Es	sq.			
(Name	e of Person)			
Statman Harris Siegel & Eyrich, LLC				
(Firm	/Company)		• .	
255 East Fifth Street, 29th Floor				
	ddress)	£,5;	40	
Cincinnati, OH 45202		Chi Tai	007 -	7
(City/State	and Zip Code)	- <u>SEC</u>	9	r
For further information concerning this matter, pleas	e call:	FLORIDATE	* :	_
Jill R. McGrail	at (513) 345-8287	15	O:	
(Name of Person)	(Area Code & Daytime Telephone N	Number	•)	
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			
Enclosed is a check for the following amount:				

☑ \$125.00 Filing Fee

☐ \$130.00 Filing Fee & ☐ \$155.00 Filing Fee & ☐ \$160.00 Filing Fee, Certificate

Certificate of Status Certified Copy of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

October 8, 2004

JILL R. MCGRAIL STATMAN HARRIS SIEGEL & EYRICH LLC 255 EAST FIFTH STREET, 2900 CHEMED CENTE CINCINNATI, OH 45202

SUBJECT: HERITAGE FINANCIAL SOLUTIONS, LLC

Ref. Number: W04000037231

We have received your document for HERITAGE FINANCIAL SOLUTIONS, LLC and your check(s) totaling \$125.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please note that you submitted two certificates for HERITAGE LAND TITLE, LLC. One of the certificates was filed with that company's application, and the other was attached to this application. We are returning that second certificate to you in this mailing.

Please return 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) 245-6958.

Letter Number: 904A00058484

Lee Rivers Document Specialist LED Wayner

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

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 REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(Name of Foreign Limited	Liability Company)
Dhio	3. 20-0928803
Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
March 26, 2004	5 Perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
October 1, 2004	e de la companya de
(Date first transacted business in F (See sections 608.501 & 608.502 F.	S. to determine penalty liability)
7264 Columbia Road, Suite 1000, Maineville, Ohio 45	5039 E# 8
	A.
	<u> </u>
(Street Addres	ss of Principal Office)
If limited liability company is a manager-manage	d company check here 🗸
If fillition theorite, company to a manager manage	d company, check here 🗹 💮 🚍 🚍
mm1 1 11 1 11 1 11 1	
The name and usual business addresses of the ma	inaging members or managers are as follows:
	inaging members or managers are as follows:
The name and usual business addresses of the ma	
Patrick Griffor, Managing Member; 7264 Columbia R	oad, Suite 1000, Maineville, OH 45039
Patrick Griffor, Managing Member; 7264 Columbia R Description: Descrip	oad, Suite 1000, Maineville, OH 45039 Odays old, duly authenticated by the official having custody of rea
Patrick Griffor, Managing Member; 7264 Columbia R Description: Descrip	oad, Suite 1000, Maineville, OH 45039 Odays old, duly authenticated by the official having custody of recopy is not acceptable. If the certificate is in a foreign language, a
Patrick Griffor, Managing Member; 7264 Columbia R Description of the certificate of existence, no more than 9 is installed in an original certificate of existence, no more than 9 is installed in under the law of which it is organized. (A photocomulation of the certificate under eath of the translator must be su	oad, Suite 1000, Maineville, OH 45039 Odays old, duly authenticated by the official having custody of reopy is not acceptable. If the certificate is in a foreign language, a bmitted.)
Patrick Griffor, Managing Member; 7264 Columbia R Description of the certificate of existence, no more than 9 is installed in an original certificate of existence, no more than 9 is installed in under the law of which it is organized. (A photocomulation of the certificate under eath of the translator must be su	oad, Suite 1000, Maineville, OH 45039 Odays old, duly authenticated by the official having custody of reopy is not acceptable. If the certificate is in a foreign language, a bmitted.)
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an affirmation under the penalties of perjury that the facts stated herein are true.)

Typed or printed name of signee

Patrick Griffor

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 ∞ 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.

	The name of the Limited Liability Company is:		<u> </u>	
2.	. The name and the Florida street address of the registered agent and office are:			
	NationaCorp Registered Agents, Inc.	SECH	1,00	
	(Name)	ALIAS ALIAS	130	7
	526 E. Park Avenue	SEE	9-	
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	, FLC	M	C
	Tallahasasa FL 32301	ATE	16	
	Çity/State/Zip			
lid Ag re	aving been named as registered agent and to accept service of process for the above state ability company at the place designated in this certificate, I hereby accept the appointment and agree to act in this capacity. I further agree to comply with the provisions of a clating to the proper and complete performance of my duties, and I am familiar with anabligations of my position as registered agent as provided for in Chapter 608, Florida Sta	ent as reg Il stabute: ì accept t	gistere s	ıd
X	AGSM Hand ASSISED			

(Signature) (NC855

\$ 100.90 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.80 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 HERITAGE FINANCIAL SOLUTIONS, LLC, an Ohio Limited Liability Company, Registration Number 1451358, was organized within the State of Ohio on March 26, 2004, is currently in FULL FORCE AND EFFECT upon the records of this office.

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SECKLIANY STATE
TALLAHASSEE, FLORIDA



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 23rd day of September, A.D. 2004

Ohio Secretary of State