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7835 HAY -3 Py 1: 02 SECTION 14.2. (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:

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TRANSMITTAL LETTER

FILED

TO:

Registration Section

Division of Corporations

MELLANGE THE

SUBJECT:

Allf Family, LLC

(Name of Limited Liability Company)

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

Michelle Cates Deal					
(Name of Person)					
, ,					
Michelle I Cates, P.A.					
(Firm/Company)					
` ' ''					
201 Front Street, Ste 110					
(Address)					
,					
Key West, FL 33040					
(City/State and Zip Code)					

For further information concerning this matter, please call:

Michelle Cates Deal at (305) 296-7760 (Area Code & Daytime Telephone 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

FILED

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:
1 Plic mouth and
1. Allf Family, LLC (Name of Foreign Limited Liability Company)
2. State of Ohio (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
Company to Organization
4. August 8 2000 5. Perfectual (Duration: Year limited liability company will cease to
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
A. 1 18 222
6. Mpril 10, 2005
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
(bootstand to start at the star
7. <u>Cecil E. Allf, Manager</u>
8 Salt Marsh Drive
Amelia Island, Florida 32034 (Street Address of Principal Office)
(Street Address of Principal Office)
8. If limited liability company is a manager-managed company, check here 🔀
8. If minica habinty company is a manager-managed company, check here
9. The name and usual business addresses of the managing members or managers are as follows:
y. The hame and about submission and response of the members of managers are as some in
Cecil E. Allf
5710 Wooster Pike Ste 212
Cincinnati, OH 45227
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 oath of the translator must be submitted.)
11. Nature of business or purposes to be conducted or promoted in Florida: This Conceration may encage
or transact in any or all lawful activities or business permitted under the laws of the United
State, the State of Florida or any other state, country, territory or nation.
- Col College
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
an affirmation under the penalties of perjury that the facts stated herein are true.)

Typed or printed name of signee

FILED

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE 10.55 MAY -3 P 1: 02

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE GRIDA 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	f the Limited Liability Co	mpany is:			
Allf Fa	amily, LLC				
2. The name ar	nd the Florida street addre	ess of the registered a	gent and office are:		
	Michelle Cates Deal (Name)				
		(Panic)			
201 Front Street, Ste 110					
Florida Street Address (P.O. Box NOT ACCEPTABLE)					
	Key West,	FL City/State/Zip	33040		
		Ony, owner, Dry			
liability company agent and agree relating to the pi	y at the place designated i to act in this capacity. If roper and complete perfor	in this certificate, I he further agree to compl mance of my duties, a	f process for the above sta reby accept the appointme ly with the provisions of al and I am familiar with and a Chapter 608, Florida Sta	ent as registered Il statutes I accept the	

\$ 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 ALLF FAMILY,LLC, an Ohio Limited Liability Company, Registration Number 1174217, was organized within the State of Ohio on August 08, 2000, 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 17th day of April, A.D. 2005

Ohio Secretary of State

Validation Number: V2005107AA1E97