## MWW000001859

(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:			

Office Use Only



600068159006

03/31/06--01011--006

\*\*130.00

2006 MAR 3 | AM I

SECRETARY OF STATE IVISION OF CORPORATIONS

06 HAR 31 AH IO: 24 DIVISION OF CORFORATION

RECEIVED

	INC. 236 East 60	h Avenue . Tallahassee, Florida 32303	
	P.O. Box 37066 (32315-7066)		ux (850) 222-1666
	V	VALK IN	
	PICK UP:	3/31/06	
	CERTIFIED COPY		
K	РНОТОСОРУ		
×	CUS		
	FILING	L Loreian	
•			
	CK Solutions	L L C.	: <u>.</u> 9 -
	(CORPORATE NAME AND DOCUMENT #)		NISION OF C
•			AR 3
	(CORPORATE NAME AND DOCUMENT #)		OF ST
•	(CORPORATE NAME AND DOCUMENT #)	<u> </u>	1: 10 Hz
•	(CORPORATE NAME AND DOCUMENT #)		<del></del>
	(CORPORATE NAME AND DOCUMENT #)		
	(CORPORATE NAME AND DOCUMENT #)		
	AL INSTRUCTIONS:	-	
PECLA	dimornocitons.	<u> </u>	

## 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)
2 NHIO 3 34-1492535
1. CK Solutions the (Name of Foreign Limited Liability Company)  2. (Jurisdiction under the law of which foreign limited liability company is organized)  3. 34-149 2535  (FEI number, if applicable)
4. Dec. 18, 1996  (Date of Organization)  5. Per pertual  (Duration! Year limited liability company will cease to exist or "perpetual")
(Street Address of Principal Office)  (Date first transacted business in Florida, if prior to registration.)  (See sections 608.501 & 608.502 F.S. to determine penalty liability)  7. 21460 Showflower Dr. Rocky River. 0 H 44116 F. Showflower D
(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: 5 \(\frac{7}{8}\)  Karen J. Mikula 21460 Snowflower Dr. Rocky River, OH 44
·
James F. Mikula 21460 Snowflower Dr. Rocky River, OH 44
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: Real Estate
management
Karen J. Mikula
Signature of a member of 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.)
Karen J. Mikula
Typed or printed name of signee

## 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 Company is:		
	CK Solutions, LhC		M w Fr
2.	The name and the Florida street address of the registered agent and office are:	2000	SIAID SE
	Christine Rueda	2006 MAR 3 1	FILE ECRETARY SION OF CO
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	AMII: II	D OF STATE RPORATION
	Orlando FL 32836 City/State/Zip	C	in .

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, Florida Statutes.

Christine Kueda

\$ 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 CK SOLUTIONS, LLC, an Ohio Limited Liability Company, Registration Number 962148, was organized within the State of Ohio on December 18, 1996, is currently in FULL FORCE AND EFFECT upon the records of this office.

2006 MAP 2 1 AM II. 10



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 30th day of March, A.D. 2006

**Ohio Secretary of State** 

Validation Number: V200689M7B7BD