# M13000003514

(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



800419873998

12 93/28--21/15--016 \*\*27,01

### COVER LETTER

TO:	Registration Section Division of Corporations			
CI III I	cor. Corrigan, Krause, Ha	rrison. Long	. Harsaı	r. CPA's LLC
SUBJ	Name of Foreign			
Dear 9	Sir or Madam:			
The er	nclosed application, certificate and fee(s) a	ire submitted	for filing.	
Please	return all correspondence concerning this	matter to the	following	g:
	Mary R. Stinn, Director			
	Name of Person		_	
	Corrigan Krause			
	Firm/Company		_	
	191 American Blvd., Suite 20	01	_	
_	Address			
	Westlake, OH 44145		_	
	City/State and Zip Code			
	molly@corrigankrause.com	1		
E-n	ail address: (to be used for future annual	report notifica	tion)	
For fu	rther information concerning this matter, p	olease call;		
	Mary R. (Molly) Stinn	at ( 440	) .	471-0804
	Name of Person	Area Code	& Dayti	me Telephone Number
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Division The Cer 2415 N.	Idress: Ition Section In of Corporations Interest of Tallahassee Interest Suite 810 Inter
	Enclosed is a check for the following a Filing Fee  \$\square\$ \$\\$30\$ Filing Fee & Certificate of Status	imount:  \$55 Filing Certified C		☐ \$60 Filing Fee, Certificate of Status & Certified Copy



December 20, 2023

MARY R. STINN, DIRECTOR CORRIGAN KRAUSE 191 AMERICAN BLVD SUITE 201 WESTLAKE, OH 44145

SUBJECT: CORRIGAN, KRAUSE, HARRISON, LONG, HARSAR, CPA'S LLC

Ref. Number: M13000003514

We have received your document for CORRIGAN, KRAUSE, HARRISON, LONG, HARSAR, CPA'S LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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.

The certificate of existence must be issued within the last 90 days by the Secretary of State which has custody of the records in the jurisdiction under the laws of which the above listed entity is incorporated/organized.

If you have any questions concerning the filing of your document, please call (850) 245-6000.

Letter Number: 123A00028994

Neysa Culligan Regulatory Specialist III

www.sunbiz.org

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

#### SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears	on the records of the Flor	ida Department of	
State: Corrigan, Krause, Harrison,	, Long, Harsar, CPA	's LLC	
Enter new principal office address, if applicable:		TALL	2024
(Principal office address MUST BE A STREET ADDRESS)		AH:	JAN 2
INUST BE A STREET ADDRESS		35E	<u>~~</u> :
Enter new mailing address, if applicable: (Mailing address			AH 9: 23
MAY BE A POST OFFICE BOX)	-	DA	<u>ω</u>
2. The Florida document number of this limited liab	vility company is:	M13000003514	<del></del>
3. Jurisdiction of its organization: Ohio			
4. Date authorized to do business in Florida:	June 5, 2013		
SECTION II (5-9 complete only the applicable cl	hanges)		
3. New hame of the infilled hability combany.		rrison, Harsar CPAs v Company, ""L.L.C.," or	
(If name unavailable, enter alternate name adopted for copy of the written consent of the managers or manamust contain "Limited Liability Company," "L.L.C.	aging members adopting (	ting business in Florida an the alternate name. The alt	d attach a ternate name
6. If amending the registered agent and/or registered registered agent and/or the new registered office add		cords, enter the name of the	<u>he new</u>
Name of New Registered Agent:	<del></del>	<del></del>	<del></del>
New Registered Office Address:			
	Enter F	lorida Street Address	
<u></u>	City	, Florida Zip C	ode.
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent the provisions of all statutes relative to the proper a and accept the obligations of my position as register document is being filed to merely reflect a change ir liability company has been notified in writing of this	istered Agent:  and agree to act in this conditions are performance and complete performance agent as provided for a the registered office add	capacity. I further agree to of my duties, and I am fa in Chapter 605. F.S. Or. i	o comply with miliar with if this

itle/ Capacity	<u>Name</u>	Address	Type of Actio
lember	David F. Long	2055 Crocker Rd, Westlake, OH 44145	□Add
			⊠Rem
		<del>-</del>	
			□ Rem
<del></del>		<u> </u>	□Add
<u>_</u>		_	□Add
			□Rem
			□Add
Attached is a aforemention jurisdiction u	certificate, if required: no more th ned amendment(s), duly authentica under the law of which this entity is Mary M	nan 90 days old, evidencing the ted by the official having custody of records in sorganized.  C. Stinn, CPA are of the authorized representative  Mary R. Stinn or printed name of signee	Rem 17:4 JAN 22

Filing Fee: \$25.00

# UNITED STATES OF AMERICA STATE OF OHIO OFFICE OF THE SECRETARY OF STATE

I, Frank LaRose, 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 business entities; that said records show CORRIGAN, KRAUSE, HARRISON, HARSAR CPAS LLC, an Ohio Limited Liability Company, Registration Number 1815540, was organized in the State of Ohio on October 31, 2008, 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 20th day of December, A.D. 2023.

L. John

Ohio Secretary of State

Validation Number: 202335403188



DATE 01/24/2023 DOCUMENT ID 202300502070

DESCRIPTION
OHIO LLC - AMENDMENT (LAM)

FILING 50.00 EXPED 0.00

DERT COPY 0.00 0.00

Receipt

This is not a bill. Please do not remit payment.

REMINGER CO., LPA 154 COLUMBUS AVENUE SANDUSKY, OH 44870

## STATE OF OHIO CERTIFICATE

Ohio Secretary of State, Frank LaRose 1815540

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

CORRIGAN, KRAUSE, HARRISON, HARSAR CPAS LLC

and, that said business records show the filing and recording of:

Document(s)

OHIO LLC - AMENDMENT

Document No(s):

202300502070

Effective Date: 01/24/2023



United States of America State of Ohio Office of the Secretary of State Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 24th day of January, A.D. 2023.

Fil flee

Ohio Secretary of State