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COVER LETTER

JBJECT:	LORAD, LLC
	Name of Limited Liability Company
	on by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate submitted to register the above referenced foreign limited liability company to transact business in Flor
ease return all correspo	ondence concerning this matter to the following:
	Kim WATRORT
	Name of Person
	12212
	Firm/Company
	JURAD, LL C Firm/Company 24400 Sperry Drive Address
	West Jake Chio 44145
	West lake, Ohio 44/45 City/State and Zip Code Kwatroha@ fal/Drotect.com E-mail address: (to be used for future annual report notification)
	Kwatroha@fallprotect.com
or further information (concerning this matter, please call:
- Kun	Name of Person Area Code & Daytime Telephone Number
	Name of Person Area Code & Daytime Telephone Number
MAILING AD Division of Cor	
Registration Se	ction Registration Section
P.O. Box 6327	
Tallahassee, FL	Tallahassee, FL 32301
inclosed is a check	for the following amount:
□ \$125.00 Fili	ng Fee \$\Bigcup \$130.00 \text{ Filing Fee & }\Bigcup \$155.00 \text{ Filing Fee & }\Bigcup \$160.00 \text{ Filing Fee, Certificate } \text{Certified Copy} \text{ of Status & Certified Copy}
	* Check Sent previously for 811000
	*Check Sent previously for \$16000 8/16/13 15/85 #160.00, Kept by
	REGISTRATION DIVISION LAST TIME
	We Mailed REGISTRATION



RECEIVED

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SECRETARY OF STATE TALLAHASSEE, FLORIBA

August 28, 2013

KIM WATROBA LORAD, LLC 24400 SPERRY DR WESTLAKE, OH 44145

SUBJECT: LORAD, LLC

Ref. Number: W13000048026

We have received your document for LORAD, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FOREIGN CORPORATION, but your entity is a FOREIGN LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

Please return the corrected original and one copy of your document, along with 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) 245-6051.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 613A00020501

www.sunbiz.org

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; must include "Limited Liability Company," "L.L.C.," or "LLC.") Diversified FALL Protection LTD. (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.") 3. <u>36-4598170</u> (FE) number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) (Duration: Year limited liability company will cease to exist or "perpetual") (Date first transacted by siness in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 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: 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: a member or an authorized representative of a member. (In accordance with section 602.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.) TEFF SCHNEID

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:

Lorad, LLC

If unavailable, the alternate to be used in the state of Florida is:

Diversified Fall Protection

2. The name and the Florida street address of the registered agent and office are:

John W. West III

(Name)

5602 Marquesas Circle, Suite 212

Florida Street Address (P.O. Box NOT ACCEPTABLE)

Sarasota

. 34233

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, Florida Statutes.

(Signature)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

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

I, Jon Husted, 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 LORAD, LLC, an Ohio Limited Liability Company, Registration Number 1663222, was organized within the State of Ohio on November 29, 2006, 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 25th day of July, A.D. 2013.

Ohio Secretary of State

an Huster

Validation Number: 201320600089