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(Requestor's Name)
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(Business Entity Name)
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400259428854



ACCOUNT NO. : I2000000195

REFERENCE :

4305461

AUTHORIZATION

COST LIMIT

ORDER DATE: April 25, 2014

ORDER TIME : 9:22 AM

ORDER NO. : 107599-005

CUSTOMER NO: 4305461

FOREIGN FILINGS

NAME: CDD LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
PLAIN STAMPED COPY

_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Emily Gray -- EXT# 52925

EXAMINER:

COVER LETTER

	Registration Section Division of Corporations						
SUBJE <i>C</i>	T: CDD LLC						
		Name of I	Limited Lial	oility Company			
The enclo Existence	osed "Application by Foreig e, and check are submitted to	n Limited Liability o register the above	Company: referenced	for Authorization foreign limited	on to Trans d liability o	sact Business in Florida," Company to transact busines	ertificate o s in Florida
Please ret	turn all correspondence con	cerning this matter t	to the follo	wing:			
	Stephanie Alexand	er				,	20
	,		Name o	f Person		100 28 40	2014 AP?
	Keating Muething	& Klekamp PLL				30.35	\sim
			Firm/Co	rmpany		SA Fig	5 ≥
	l E. 4th Street, Sui	te 1400				1 614 -11	
			Add	iress			ş. 14
	Cincinnati, OH 452	202				k - ₹	
			City/State ar	nd Zip Code			
•	salexander@kmkla	w.com					
		E-mail address: (to b	e used for f	uture annual rep	ort notificat	ion)	
For furthe	er information concerning the	his matter, please ca	d1:				
	Stephanie Alexander		at	(513	579-6528	3	
	Name of C	Contact Person		Area Code	Dayt	ime Telephone Number	
1 1	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314	D R C 26	egistration lifton Build	Corporations Section ling ive Center Circ	:le		
	ed is a check for the fol State 125.00 Filing Fee	lowing amount: 3 \$130.00 Filing Fe Certificate of Stat		\$155.00 Filing Certified Copy		☐ \$160.00 Filing Fee, Cert of Status & Certified Co	

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. CDD LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.," or	C.")		
C Document Destruction ILC			
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name in Liability Company, "L.L.C," or "LLC.")	ust include	: "Limite	:đ
2. Delaware 3.			
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)	10 cm	2011 AP	
4	<u> </u>	. 79	
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)		25	
5. 6800 Cintas Blvd., Mason, OH 45040	1"1"; 1"14";	77.7	T
		is R	1:
(Street Address of Principal Office)	골등		
6, 6800 Cintas Blvd., Mason, OH 45040		_	
7. The name, title or capacity and address of the person(s) who has/have authority to manage Cintas Corporation No. 2, Sole Member, 6800 Cintas Blvd., Mason, OH 45040	ge is/are:		
8. Attached is an original certificate of existence, no more than 90 days old, duly authenticat having custody of records in the jurisdiction under the law of which it is organized. (A photo acceptable. If the certificate is in a foreign language, a translation of the certificate under out must be submitted) Signature of an authorized person (In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that it am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for	ocopy is h of the	not transla	itor
		12:41/	
Ross J. Bextermueller, Authorized Representative Typed or printed name of signee			
Typed of printed name of signed			

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

CDD LLC	f the Limited Liability Company is:	76 Z01
	the alternate to be used in the state of Florida is:	2014 APR 25
2. The name a	nd the Florida street address of the registered agent and office are: Corporation Service Company	1
	7 (F)	
	(Name)	
	1201 Hays Street	
	Tallahassee FL 32301	
	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 605, Florida Statutes.

By: Assistant VP

(Signature)

Tracy Manganelli
Assistant VP

\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional)

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "CDD LLC" IS DULY FORMED UNDER THE
LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A
LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF
THE TWENTY-FIFTH DAY OF APRIL, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CDD LLC" WAS FORMED ON THE FOURTH DAY OF APRIL, A.D. 2014.

5511617 8300

140516977

DATE: 04-25-14

You may verify this certificate online at corp.delaware.gov/authver.shtml

Jeffrey W Bullock, Secretary of State

AUTHENTY CATION: 1319448