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(Re	questor's Name)				
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(City	//State/Zip/Phone	e #)			
☐ PICK-UP	WAIT	MAIL			
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MAY 2 8 2014



May 13, 2014

GREGORY R. WILSON GREGORY R. WILSON CO., LLC 1411 SYCAMORE STREET CINCINNATI, OH 45202

SUBJECT: MY GORILLA GARGAGE, LLC

Ref. Number: W14000030170

We have received your document for MY GORILLA GARGAGE, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), AuthorizedPerson (AP), or Authorized Representative (AR).

Please return 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.

Letter Number: 314A00010217

Neysa Culligan Regulatory Specialist II

www.sunbiz.org

COVER LETTER

TO:	Registration Section Division of Corporations	on of Corporations		
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SUBJ	ECT: MY GORILLA GARAGE	, LLC	· · · · · · · · · · ·	
	Nam	e of Limited Liability Company	a such the first	·
The en Exister	closed "Application by Foreign Limited Liab ace, and check are submitted to register the al	ility Company for Authorization to bove referenced foreign limited liab	Transact Business in Flor ility company to transact	rida," Certificate of business in Florida
Please	return all correspondence concerning this ma	atter to the following:		
	Gregor	y R. Wilson		
		Name of Person		
	Gregor	y R. Wilson Co., LLC		•
		Firm/Company		
	1411 S	ycamore Street		
		Address		
	Cincin	nati, OH 45202		
		City/State and Zip Code		
	amf	lawoffice@fuse.net		
	E-mail address:	(to be used for future annual report not	ification)	
For fu	ther information concerning this matter, plea	se call:		
	Anno Eloddores	. 510	722 0000	
	Anne Fledderman Name of Contact Person		723–0888 Daytime Telephone Numbe	
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327	STREET ADDRESS: Division of Corporations Registration Section Clifton Building		
	Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301		
Enclo	sed is a check for the following amou \$125.00 Filing Fee \$130.00 Filin Certificate of	g Fee & \$\Bigsim\$ \$\Bigsim\$ \$155.00 Filing Fee &	& □ \$160.00 Filing F of Status & Cert	

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. MY GORILLA GARAGE, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Lightlity Company," "L.L.C," or "LLC.")
OHIO 46-3609335
2. (Jurisdiction under the law of which foreign limited liability company is organized) 3. (FEI number, If applicable)
4. (Date first transacted business in Florids, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. 11820 Kemper Springs Drive, Ste. A
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 5. 11820 Kemper Springs Drive, Ste. A Cincinnati, OH 45240
(Street Address of Principal Office)
(Street Address of Principal Office) 6. 11820 Kemper Springs Drive, Ste. A
Cincinnati, OH 45240
(Mailing Address)
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:
Mark Steinberg Manager 11820 Kemper Springs Dr., Ste. A, Cincinnati, OH 4524
Daniel MacGloan Manager 11820 Kemper Springs Dr., Ste. A, Cincinnati, OH 4524
(The company has co-managers: Mark Steinberg and Daniel MacGloan.)
8. 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) 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 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.) Mark Steinberg
Typed or printed name of signee

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.

1. The name of the I	Limited Liability Comp	pany is:		
MY GORILLA G	ARAGE, LLC			
If unavailable, the all	ternate to be used in th	e state of Florida i	s:	
2. The name and the	Florida street address	of the registered a	gent and office arc:	
:	InCorp Services, I	Inc. (Name)		ASSEMBLE TO
	17888 67th Court N	. ,		28 ANN CANASSER
Florida Street Address (P.O. Box NOT ACCEPTABLE)			F STAT	
	Loxahatchee	FL	33470	10A 36
		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.

TOMANUM Heather Nee For In Corp Services, In C.
(Signature)

\$ 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, 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 MY GORILLA GARAGE, LLC, an Ohio For Profit Limited Liability Company, Registration Number 2227910, was organized within the State of Ohio on September 5, 2013, 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 1st day of May, A.D. 2014.

Ohio Secretary of State

in Husted

Validation Number: 201412101860