

M15000005437

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

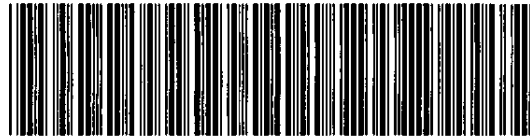
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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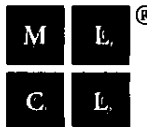


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FILED
2015 JUL 10 AM 11:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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MCCARTHY, LEBIT, CRYSTAL & LIFFMAN CO., L.P.A.

Attorneys and Counselors at Law

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Legal Assistant

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July 8, 2015

Via Federal Express

Florida Department of State
Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

Re: Silo Connectors, LLC

Dear Sirs:

Enclosed please find an Application by Foreign Limited Liability Company for Authority to Transact Business in Florida for the above-referenced limited liability company, along with a check in the amount of \$125.00 for the filing fee and a Certificate of Good Standing from the Ohio Secretary of State. Please approve this filing as soon as possible and return the appropriate paperwork to Attorney Michael D. Makofsky, as indicated on the Cover Letter.

Thank you for your time.

Very truly yours,

Karen A. Domke

Legal Assistant

Enclosures

cc: Steven P. Larson, Esq.
Michael D. Makofsky, Esq.
(letter only)

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Silo Connectors, LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

Michael D. Makofsky, Esq.

Name of Person

McCarthy, Lebit, Crystal & Liffman Co., L.P.A.

Firm/Company

101 W. Prospect Ave., Suite 1800

Address

Cleveland, Ohio 44115

City/State and Zip Code

mdm@mccarthylebit.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Steven P. Larson

216

696-1422

at ()

Name of Contact Person

Area Code

Daytime Telephone Number

MAILING ADDRESS:

Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy

☐ \$160.00 Filing Fee, Certificate
of Status & Certified Copy

**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. Silo Connectors, 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 Liability Company," "L.L.C.," or "LLC.")

2. Ohio 3. _____
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. N/A
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 1430 Fireside Trail, Broadview Heights, Ohio 44147
(Street Address of Principal Office)

6. Same
(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: C T Corporation System
Office Address: 1200 South Pine Island Road
Plantation, Florida 33324
(City) (Zip code)

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Kristin Bolden
(Registered agent's signature) **Kristin Bolden**
Assistant Secretary

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Mark N. Barrett, Manager
1430 Fireside Trail, Broadview Heights, Ohio 44147

9. Attached is a 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. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

Michael D. Makofsky
Signature of an authorized person

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

Michael D. Makofsky
Typed or printed name of signee

FILED
2015 JUL 10 AM 11:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 SILO CONNECTORS, LLC, an Ohio Limited Liability Company, Registration Number 1342948, was organized within the State of Ohio on September 26, 2002, 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 7th day of July, A.D. 2015.*

Jon Husted

Ohio Secretary of State

Validation Number: 201518860596