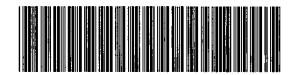
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J. HARRIS

COVER LETTER

Division of Corporations
SUBJECT: MFS Supply 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:
Karyn Brown Name of Person
MFS Supply U. Firm/Company
31100 Solon Rd #16 Address
Solon OH 44139
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Karyn Brown at (800) 607-0541 x 5093 Name of Contact Person Area Code Daytime Telephone Number
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301
Enclosed is a check for the following amount: 2 \$125.00 Filing Fee Certificate of Status Certified Copy Enclosed is a check for the following amount: 2 \$130.00 Filing Fee & \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate of Status & Certified Copy







March 23, 2016

KARYN BROWN 31100 SOLON RD #16 SOLON, OH 44139

SUBJECT: MFS SUPPLY LLC Ref. Number: W16000021773

We have received your document for MFS SUPPLY LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to s.605.0902(1)(e), Florida Statutes, the document must contain the name, title or capacity and address of at least one person who has the authority to manage the foreign limited liability company.

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.

Jenna D Harris Regulatory Specialist II

Letter Number: 216A00006003

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

1. MFS Supply LLL (Name of Foreigh Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LL			
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name muliability Company," "L.L.C," or "LLC.")	ust include "E	ımnea	
2. Oh (O (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)		<u>. </u>	
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)			
Date first transacted business in Florida, if prior to registration.)			
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905; E.S. to determine penalty liability) 5. 31100 Solon Rd #16			
Solon OH 44139 (Street Address of Principal Office)		•	
6. 31100 Solon Rd #16	S.a	L	
Salon OH 44139		و الإ 9	r. de
(Mailing Address)		70 1	-acura
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	\$ 1.00 	Æ.	1
Name: Business Filings Incorporated	(1) (<u>(1)</u> (1) (2) (1) (2)	A maketi	j d
Name: Business Filings Incorporated Office Address: 1200 South Pine Island Rd		9	Name of Street
Plantation, Florida 33324.		\sim	•
(City) (Zip code) Registered agent's acceptance:			
Having been named as registered agent and to accept service of process for the above stated limited liability designated in this application. I hereby accept the appointment as registered agent and agree to act in this cost to complywith the provisions of all statutes relative to the proper and complete performance of my duties, an accept the obligations of my position as registered agent.	ipacity. I fu	rther a	gree
Mary Jo Spalinger, Asst-Secretary (Régistered agent's signature)			
8: The name, title or capacity and address of the person(s) who has/have authority to manage is/are:			
_ Jeffrey Muencz, CFO			
31100 Solon Rd #16			
Solon, 0H 44139			
9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having cust jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the of the translator must be submitted)	ody of recor	rds in th under o	ie ath
Signature of an authorized person			
This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any fal submitted in a document to the Department of State constitutes a third degree felony as provided for in 5.817.15.	se informati 5, F.S.	on	
Typed or printed name of signee			

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 MFS SUPPLY LLC, an Ohio Limited Liability Company, Registration Number 1610013, was organized within the State of Ohio on March 21, 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 8th day of March, A.D. 2016.

Ohio Secretary of State

Jon Hastel

Validation Number: 201606801588