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PICK-UP	WAIT	MAIL			
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(Document Number)					
Certified Copies	_ Certificates	of Status			
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INCRETARY OF STATE

S Warren JUL 2 0 2016



July 12, 2016

CYNTHIA HENRY 600 GILLAM ROAD WILMINGTON, OH 45177

SUBJECT: 21059-003-00, LLC Ref. Number: W16000048304

We have received your document for 21059-003-00, LLC and your check(s) totaling \$1250.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

Stacey M Warren Regulatory Specialist II

Letter Number: 116A00014553

COVER LETTER

TO:		stration Section sion of Corporatio	ns						
SUBJEC		12665-003-00, LLC							
GCDJE			Name of	Limited Liability	Company				
						ansact Business in Florida," Certificate y company to transact business in Flori			
Please re	eturn :	all correspondence	concerning this matter to the	following:					
		Cynthia Henry	,						
			N	ame of Person					
		Firm/Company							
		600 Gillam Ro	600 Gillam Road						
		Address							
		Wilmington, OH 45177							
		City/State and Zip Code							
			E-mail address: (to be used for future annual report notification)						
For furth	er inf	ormation concernin	g this matter, please call:						
Cynthia Henry		800 at (543-55	89					
		Name o	of Contact Person	Area Code	Day	time 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		of Corporations ion Section uilding cutive Center Circle					
		check for the follow 25.00 Filing Fee	ing amount: 1 \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filin Certified Copy	ng Fee &	☐ \$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 COMPANYTOTRANSACT BUSINESS IN THE STATE OF FLORIDA:

21059-003-00, LLC		
(Name of Fore	eign Limited Liability Company; must include "Limited Liability Company," "L.L.C	.," or "LLC.")
(If name unavailable, enter al Liability Company," "L.L.C,	ternate name adopted for the purpose of transacting business in Florida. The alterna	ite name must include "Limited
2. Ohio	3.	
(Jurisdiction under the law company is organized)	of which foreign limited liability (FEI number, if appli	icable)
4	(Date first transacted business in Florida, if prior to registration.)	
600 Cillana Danad Will	(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	
5. 600 Gillam Road, Wili	mington, Ori 431//	
	(Street Address of Principal Office)	100
6. 600 Gillam Road, Wiln	• • • •	
U		a la
	(Mailing Address)	
7 Name and street address	s of Florida registered agent: (P.O. Box NOT acceptable)	P (P
Name:	C T Corporation System	STATE
Office Address:	1200 South Pine Island Road	, <u>6</u>
Office Hadious.	Plantation , Florida 33324	
	(City) , Florida (Zip cod	le)
Registered agent's accept	tance: gistered agent and to accept service of process for the above stated limitea	l liability company at the place
designated in this applica	tion, I hereby accept the appointment as registered agent and agree to act	in this capacity. I further agree
	ons of all statutes relative to the proper and complete performance of my one my one position as registered agent.	-
	By: Kristin B Kristin B Assistant S	
	(Registered agent's signature)	
8. The name, title or capa	icity and address of the person(s) who has/have authority to manage is/are:	
Donald R. DeLuca, VP of	Legal, Secretary - 7290 College Pkwy, Suite 400, Ft. Myers, FL 33907	
Jeffrey C. Wade, General	Counsel, Assistant Secretary - 600 Gillam Road, Wilmington, OH 45177	
Jeff Haungs, VP of Tax -	7290 College Pkwy, Suite 400, Ft. Myers, FL 33907	
D. Attached is a certificate	of existence, no more than 90 days old, duly authenticated by the official ha	using quatody of records in the
	of which it is organized. (If the certificate is in a foreign language, a translat	
	Sie ula	
	Signature of an authorized person	
	in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware the Department of State constitutes a third degree felony as provided for in	
	Jeffrey C. Wade	,
	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 21059-003-00, LLC, an Ohio For Profit Limited Liability Company, Registration Number 3917626, was organized within the State of Ohio on June 30, 2016, 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 19th day of July, A.D. 2016.

Ohio Secretary of State

Validation Number: 201620101848