# M60000005841

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
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Certified Copies	Certificates	s of Status
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Special Instructions to	Filing Officer:	
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Office Use Only



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUL 2 1 2016 S. YOUNG



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

July 11, 2016

CYNYHIA HENRY 600 GILLAM ROAD WILMINGTON, OH 45177

SUBJECT: 21059-005-00, LLC Ref. Number: W16000047931 SECRETARY OF STATE TALL AHASSEE, FLORIDA

We have received your document for 21059-005-00, 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.

Shelia H Young Regulatory Specialist II

Letter Number: 016A00014418

#### **COVER LETTER**

TO:		ation Section 1 of Corporation	18					
SUBJE		)59-005-00, LLC	!					
SUDUL			Name of	Limited Liability	Company			
						unsact Business in Florida," Certifi v company to transact business in l		
Please	return all	correspondence c	oncerning this matter to the	e following:				
		Cynthia Henry						
			Ŋ	Name of Person				
			F	Firm/Company				
		600 Gillam Ros	ad				16	IAI 38
	Address							
	Wilmington, OH 45177						8- 1	EX.
			City/S	State and Zip Code			PH	A. C. L. C. A. C. L. C.
	-		E-mail address: (to be use	ed for future annual	report not	ification)	2: 55	. ORID
For furt	ther inforn	nation concerning	g this matter, please call:					,\$**
	Cynthia	Henry		800 at (	543-55	89		
		Name o	f Contact Person	Area Code	Day	time Telephone Number		
	Division Registra P.O. Box	NG ADDRESS: of Corporations tion Section x 6327 see, FL 32314			Division Registrati Clifton B 2661 Exe	CADDRESS: of Corporations on Section uilding cutive Center Circle ee, FL 32301		
Enclose		ck for the followi 00 Filing Fee	ng amount: ☐ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filin Certified Copy	g Fee &	☐ \$160.00 Filing Fee, Certificat of Status & Certified Copy	.c	

### 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 COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

, 21059-005-00, LLC	SINESS IN THE STATE OF FLORIDA:		
	ign Limited Liability Company; must include "Limite	d Liability Company," "L.L.C.," or "LLC."	)
(If name unavailable, enter alt Liability Company," "L.L.C,"	ernate name adopted for the purpose of transacting bi	usiness in Florida. The alternate name must	include "Limited
Ohio			
(Jurisdiction under the law of company is organized)	of which foreign limited liability	(FEI number, if applicable)	<del></del>
4	(Date first transacted business in Florida, if pr	rior to registration	
	(See sections 605.0904 & 605.0905, F.S. to dete	ermine penalty liability)	
5. 600 Gillam Road, Wiln	nington, OH 45177		
	(Street Address of Principal Office)		16
6. 600 Gillam Road, Wilm	ington, OH 45177		
			E JUL -8
<del></del>	(Mailing Address)		<b>8</b> SEE
7. Name and street address	of Florida registered agent: (P.O. Box NOT a	cceptable)	2
Name:	C T Corporation System	·············	PM 2: 55
Office Address:	1200 South Pine Island Road		55 DA
	Plantation	, Florida 33324 (Zip code)	
Registered agent's accept	(City)	(Zip code)	
Having been named as reg designated in this applicate to complywith the provisio accept the obligations of m	istered agent and to accept service of process fion, I hereby accept the appointment as register as of all statutes relative to the proper and compared agent.  CT Corporation System	red agent and agree to act in this capa uplete performance of my duties, and I	city. I further agree
•	(Registered agent's signa		
8. The name, title or capac	city and address of the person(s) who has/have a	uthority to manage is/are	
•	Legal, Secretary - 7290 College Pkwy, Suite 400	, ,	
Jeffrey C. Wade, General (	Counsel, Assistant Secretary - 600 Gillam Road,	Wilmington, OH 45177	<del></del>
Jeff Haungs, VP of Tax - 7	290 College Pkwy, Suite 400, Ft. Myers, FL 33	907	
	Ine while	foreign language, a translation of the ce	
•	Signature of an authorized p	person	
submitted in a document to	in accordance with section 605.0203 (1) (b), Flor the Department of State constitutes a third degre Jeffrey C. Wade	rida Statutes. I am aware that any false i e felony as provided for in s.817.155, F	nformation .S.
•	Typed or printed name of sig	gnee	

## 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 21059-005-00, LLC, an Ohio For Profit Limited Liability Company, Registration Number 3917631, was organized within the State of Ohio on June 30, 2016, is currently in FULL FORCE AND EFFECT upon the records of this office.

16 JUL -8 PM 2: 55

SECRETARY OF STATE TALLAHASSEE, FLORIDA



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: 201620101800