# Mecoos

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nar	me)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
(લી)	N16-4792	8		

Office Use Only



700287430637

07/08/16--01021--016 \*\*1250.00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

JUL 2 1 2016 S. YOUNG



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

July 11, 2016

CYNTHIA HENRY 600 GILLIAM ROAD WILMINGTON, OH 45177

SUBJECT: 20947-000-00, LLC Ref. Number: W16000047928

SECRETARY DI FLORIUA
TALLAHASSEE, FLORIUA
16 JUL -8 PH 3: 03

We have received your document for 20947-000-00, 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: 816A00014416

#### **COVER LETTER**

TO:		ation Section of Corporation	ns					
SUBJE		47-000-00, LLC						
SCHOL	.c	· · · · · · · · · · · · · · · · · · ·	Name of	Limited Liability (	Company			
						insact Business in Florida," Certific company to transact business in I		
Please i	return all o	correspondence o	oncerning this matter to the	following:				
		Cynthia Henry						
			N	ame of Person		<del></del>		
Firm/Company								
600 Gillam Road						16	SEC	
	Address							
	Wilmington, OH 45177						-8	25.55 25.55
			City/S	tate and Zip Code			P	E SE
	_		E-mail address: (to be used	for future annual	report not	ification)	3: 03	CRIB
For furt	her inform	nation concerning	g this matter, please call:				<b>~</b>	<b></b>
	Cynthia	Henry		800 _ at (	543-558 _)_	89		
		Name o	f 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						
Enclose		ck for the followi 00 Filing Fee	ing amount:  \$\Boxed{\text{S130.00 Filing Fee & Certificate of Status}}\$	☐ \$155.00 Filin Certified Copy	g Fee &	□ \$160.00 Filing Fee, Certificat of Status & Certified Copy	e	

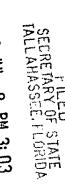
### APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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:

(Name of Fore	ign Limited Liability Company; must include "	Limited Liability Com	pany," "L.L.C.," or "LLC.")	<del></del> .
(If name unavailable, enter al Liability Company," "L.L.C,"	ternate name adopted for the purpose of transact or "LLC.")	ting business in Florid	a. The alternate name must inclu	de "Limited
2 Ohio				
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI nu	mber, if applicable)	<del></del>
4		100 - 1 - 1 - 1		
	(Date first transacted business in Florid (See sections 605.0904 & 605.0905, F.S.	a, it prior to registration to determine penalty li	on.) ability)	
5. 600 Gillam Road, Wils	nington, OH 45177			
	(Street Address of Principal Of	lice)		<b>=</b> A
6. 600 Gillam Road, Wiln	ington, OH 45177			6 E
				16 JUL -8 PM 3: 03
	(Mailing Address)			တ် မိုင်
7. Name and street addres	of Florida registered agent: (P.O. Box N	OT acceptable)		PH
Name:	C T Corporation System			ယ္က
Office Address:	1200 South Pine Island Road			<b>23</b>
	Plantation	, Florida	33324	
Registered agent's accept	(City)	•	(Zip code)	
Having been named as reg designated in this applicat to complywith the provision accept the obligations of n	ristered agent and to accept service of procion, I hereby accept the appointment as rens of all statutes relative to the proper and ay position as registered agent,  C T Corporation System	gistered agent and discomplete performa	agree to act in this capacity.	I further agree
	(Registered agent's	signature)		
8. The name, title or capa	city and address of the person(s) who has/h	ave authority to mar	age is/are:	
Donald R. DeLuca, VP of	Legal, Secretary - 7290 College Pkwy, Sui	te 400, Ft. Myers, F	L 33907	
Jeffrey C. Wade, General	Counsel, Assistant Secretary - 600 Gillam I	Road, Wilmington, (	OH 45177	
Jeff Haungs, VP of Tax - 7	290 College Pkwy, Suite 400, Ft. Myers, F	L 33907		
9. Attached is a certificate of purisdiction under the law of the translator must be su	of existence, no more than 90 days old, duly f which it is organized. (If the certificate is omitted)  Signature of an author	in a foreign languas	e official having custody of r	ecords in the ate under oath
submitted in a document to	in accordance with section 605.0203 (1) (b) the Department of State constitutes a third of Jeffrey C. Wade	), Florida Statutes. I	am aware that any false inforr vided for in s.817.155, F.S.	nation
	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 20947-000-00, LLC, an Ohio For Profit Limited Liability Company, Registration Number 3917627, 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: 201620101798