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SEURETARY OF STATE

2016 SEP -6 PHI2: :

K.SALI EXAMINER SEP - 8

COVER LETTER

| TO: | Registration Section Division of Corporation | s | | • | ³ | |
|---------|----------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------|------------------------------------|--------------------------------------------|-------------------------------------------------------------------------------|--|
| SUBJI | Radiant-Essence | | | | | |
| SODJI | | Name of L | Limited Liability (| Company | | |
| | | eign Limited Liability Comp I to register the above refere | | | | |
| Please | return all correspondence c | oncerning this matter to the f | following: | | | |
| | Jennifer Schuite | emaker | | | | |
| | | Na | me of Person | | | |
| | Radiant-Essenc | e | | | | |
| | Firm/Company | | | | | |
| | 2421 N BAY R | 2421 N BAY ROAD | | | | |
| | <u> </u> | | Address | | | |
| | MIAMI BEACI | H, FL 33140 | | | | |
| | | City/St | ate and Zip Code | | | |
| | j.schuitemaker@i | cloud.com | | | | |
| | | E-mail address: (to be used | for future annual | report not | ification) | |
| For fur | ther information concerning | g this matter, please call: | | | | |
| | Jennifer Schuitemaker | | 513 at (| 300-278 | 32 | |
| | 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 | | | Division of Registratic Clifton B 2661 Exe | ADDRESS: of Corporations on Section uilding cutive Center Circle ee, FL 32301 | |
| Enclos | ed is a check for the following \$125.00 Filing Fee | ing amount: \$\Bigsize \\$130.00 \text{ Filing Fee & Certificate of Status}\$ | □ \$155.00 Filin Certified Copy | ig Fee & | ☐ \$160.00 Filing Fee, Ce of Status & Certified Cop | |

| | TION 6050902, FLORIDA STATUTES, THE FO | LLOWING IS SUBMITTED TO REGISTER A | FOREIGN LIMITED LIABI |
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| | JSINESS INTHE STATE OF FLORIDA: | | |
| Radiant-Essence 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, Ohio | Iternate name adopted for the purpose of transa " or "LLC.") | acting business in Florida. The alternate nar | ne must include "Limited |
| · (Iurisdiction under the law | of which foreign limited liability 3 | (FEI number, if applicable | <u> </u> |
| company is organized) May 1st 2016 | of which foreign innice habitity | (13) напост, и аррисаоте | , |
| | (Date first transacted business in Flor (See sections 605.0904 & 605.0905, F.S. | ida, if prior to registration.) . to determine penalty liability) | _ |
| | | | 7201 |
| 2421 N Bay Road, ML | AMI BEACH, FL 33140 | | SET |
| | (Street Address of Principal C | Office) | 一芸ュー |
| | MIAMI BEACH, FL 33140 | | _ 55% - 17 |
| | | | PHIR: 34 |
| | (Mailing Address) | | - 38 3 |
| Name and street address | ss of Florida registered agent: (P.O. Box | NOT acceptable) | F |
| | JENNIFER SCHUITEMAKER | <u></u> | • |
| Name: | | | • |
| Office Address: | 2421 N BAY ROAD | | |
| | MIAMI BEACH | , Florida 33140 (Zip code) | |
| | | , i lorida | _ |
| | (City) | (Zip code) | |
| | tance: | | ility company at the plac |
| Having been named as re lesignated in this applica o complywith the provisi | (City) stance: rgistered agent and to accept service of pre tion, I hereby accept the appointment as ons of all statutes relative to the proper a my position as registered agent. | ocess for the above stated limited liab registered agent and agree to act in th | is capacity. I further ag |
| Having been named as re lesignated in this applica o complywith the provisi | tance: gistered agent and to accept service of pi tion, I hereby accept the appointment as ons of all statutes relative to the propera | rocess for the above stated limited liab registered agent and agree to act in th nd complete performance of my dutie | is capacity. I further ag |
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| Having been named as re lesignated in this applica o complywith the provisi- accept the obligations of t 8. The name, title or capa | stance: egistered agent and to accept service of protion, I hereby accept the appointment as ons of all statutes relative to the proper a my position as registered agent. (Registered agent acity and address of the person(s) who has | rocess for the above stated limited liab registered agent and agree to act in the nd complete performance of my duties the signature) | is capacity. I further ag |
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| designated in this applicate complywith the provision complywith the provision coupt the obligations of the complex of the com | registered agent and to accept service of protion, I hereby accept the appointment as ons of all statutes relative to the proper a my position as registered agent. (Registered agent accity and address of the person(s) who has AKER-CEO PRESIDENT | rocess for the above stated limited liab registered agent and agree to act in the nd complete performance of my duties t's signature) /have authority to manage is/are: | is capacity. I further ag |
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Typed or printed name of signee

JENNIFER SCHUITEMAKER

UNITED STATES OF AMERICA STATE OF OHIO OFFICE OF THE SECRETARY OF STAT

TE TANGEN 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 RADIANT-ESSENCE, LLC, an Ohio For Profit Limited Liability Company, Registration Number 2050404, was organized within the State of Ohio on September 23, 2011, 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 29th day of August, A.D. 2016.

Ohio Secretary of State

on Hastel

Validation Number: 201624200952