## M1600009189

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(2.9, 2.3.3.2, 7. 7. 1.)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





600292145946

11/14/16--01026--009 \*\*160.00

16 WW 11 PM 12: 20

J. HARRIS

## **COVER LETTER**

TO:

**Registration Section** 

Division of Corporations
SUBJECT: Merrith West 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:
Sandy Touschner Name of Person  Mentel West LLC  Firm/Company
Name of Person
ments west LLC
Firm/Company
198 Industrial Park BIVL Address
Address
Mentor, OH 44060 City/State and Zin Code
E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Sandy Touschar at (440) 220-7811 Name of Contact Person Area Code Daytime Telephone Number
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:  \$\Begin{array}{c c c c c c c c c c c c c c c c c c 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.  COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	ir
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.")	
2 Ohio 81-07/1177	
2. Oh io (Jurisdiction under the law of which foreign limited liability company is organized)  3. 8/-07///7  (FEI number, if applicable)	
4. (Data time transported building in File 16.	
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)  5	
• • • • • • • • • • • • • • • • • • • •	
6. Sime	<u>ਛ</u>
(Mailing Address)	A S
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	<u></u>
Name: Incorp Services, Inc.	P# 12:
Name: Incorp Services, Inc.  Office Address: 17888 67th Lourt North  Loxabatchee , Florida 33470  (City) (Zip code)	2:2
loxahatchee Florida 33470	ίĎ
(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 company at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to complywith the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with a	e nd
Accept the obligations of my position at registored agept.  Kathy Shin on behalf of InCorp Services	
(Registered agent's signature)	
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:	
G. michael Merntt, member	
Keith S. Merritt, member	
7198 Industrial Park Blud Mentur, 04/4060	
9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)	
Sandy Touschner  Signature of an authorized person	
Signature of an authorized person	
This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.	
Sandy Touschner Typed or printed name of signee	
, <b>↑ E - α α α Γ</b> +	

## 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 MERRITT WEST LLC, an Ohio For Profit Limited Liability Company, Registration Number 2448308, was organized within the State of Ohio on November 23, 2015, 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 21st day of October, A.D. 2016.

Ohio Secretary of State

Validation Number: 201629501476