## 1117000000727

(Requestor's Name)						
(Address)						
(Address)						
(City/S	tate/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						

Office Use Only



800293477318

01/24/17--01009--006 \*\*130.00

ZOIT JAN 24 PM 42 28

K. SALY JAN 26 2017

## **COVER LETTER**

Registration Section

TO:

Division of	f Corporations	1						
SUBJECT:		М	ark S. Salopek, LI	LC				
SUBJECT:	Name of Limited Liability Company							
The enclosed "Appl Existence, and chec	ication by Fore k are submitted	ign Limited Liability Comp to register the above refere	any for Authorizat	ion to Trai ed liability	nsact Business in Florida," company to transact busin	Certificate of ess in Florida		
Please return all cor	respondence co	oncerning this matter to the	following:					
		Jacq	ueline Bennett					
_		Na	me of Person	<u>,                                      </u>				
		•	GPD Group					
_		Fi	m/Company					
		520 S N	Main St., Ste. 2531	I				
			Address					
		Ak	ron, OH 44311					
_		City/St	ate and Zip Code					
		-	@ gpdgroup.com					
		E-mail address: (to be used	for future annual	report not	ification)			
For further informa	tion concerning	g this matter, please call:						
	Jacqu	ueline Bennett	330 at (	`	72-3593			
	Name o	f Contact Person	Area Code	Day	time Telephone Number			
Division of Registration P.O. Box	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					
Enclosed is a check  ☐ \$125.06	c for the follow O Filing Fee	ing amount:  \$\Bigsim \text{\$130.00 Filing Fee & Certificate of Status}\$	☐ \$155.00 Filir Certified Copy	ng Fee &	□ \$160.00 Filing Fee, C of Status & Certified Co			

## 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: Mark S. Salopek, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," (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.") Ohio 81-2674675 (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) (Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 520 S, Main St., Stc. 2531 Akron, OH 44311 (Street Address of Principal Office) 520 S Main St., Ste. 2531 Akron: OH 44311 (Mailing Address) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) C T Corporation System Name: 1200 South Pine Island Road Office Address: Plantation 33324 Florida (City) (Zin 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 and accept the obligations of my position as registered agent. CT Corporation System
Michael Scraphin Asst. Secretary (Registered agent's signature) 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Mark S. Salopek, Member 520 S Main St., Ste. 2531 Akron, OH 44311 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. Alf the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted 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.

Typed or printed name of signs

## UNITED STATES OF AMERICA STATE OF OHIO OFFICE OF THE SECRETARY OF STA

2017 JAN 24 PM \$28

TALLAHASSEE FLORIS

ATE

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 MARK S. SALOPEK, LLC, an Ohio For Profit Limited Liability Company, Registration Number 3899566, was organized within the State of Ohio on May 3, 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 11th day of January, A.D. 2017.

**Ohio Secretary of State** 

on Hastel

Validation Number: 201701100988