(Requestor's Name)								
(Address)								
(Address)								
(City/State/Zip/Phone #)								
PICK-UP WAIT MAIL								
(Business Entity Name)								
(Document Number)								
Certified Copies Certificates of Status								
Special Instructions to Filing Officer:  CRT WIN-19316								
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### FLORIDA DEPARTMENT OF STATE Division of Corporations

March 7, 2017

GARY N. UNDERHILL 2148 E. EAGLE PASS WOOSTER, OH 44691

SUBJECT: EZ PAY BUILDINGS 9, LLC

Ref. Number: W17000019216

We have received your document for EZ PAY BUILDINGS 9, LLC and your check(s) totaling \$125.00. 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.

NEED GOOD STANDING CERTIFICATE, RECEIPT FOR FILING DOES NOT MEET STATUTORY REQUIREMENTS,

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.

Stacey M Warren Regulatory Specialist II

Letter Number: 117A00004392

### **COVER LETTER**

TO:

**Registration Section** 

Divis	ion of Corporation	18						
SUBJECT: _	EZ Pay Buildings 9	LLC						
	Name of Limited Liability Company							
				on to Transact Business in Florida," Certificate of liability company to transact business in Florid				
Please return a	III correspondence	concerning this matter to the	following:					
	Gary N Underl	nill						
		Ni	ame of Person					
	EZ Pay Buildir	ngs 9 LLC						
	Firm/Company							
	2148 E Eagle Pass							
Address								
Wooster, OH 44691								
City/State and Zip Code								
	ezpaybuildings@	yahoo.com						
E-mail address: (to be used for future annual report notification)								
For further inf	ormation concernin	g this matter, please call:						
Gary	N Underhill		330 at ( )	264-0833				
	Name o	of Contact Person	Area Code	Daytime Telephone Number				
Divis Regis P.O.	LING ADDRESS: ion of Corporations stration Section Box 6327 hassee, FL 32314		[ F (	Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Fallahassee, FL 32301				
	check for the follow 25.00 Filing Fee	ring amount:  \$\square\$ \$\square\$ \$130.00 \text{ Filing Fee & Certificate of Status}\$	□ \$155.00 Filing Certified Copy	Fee & ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy				

## 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:

(Name of Fore	ign Limited Liability Con	npany; must includ	te "Limited Liabi	IIIy Company, " L.L.	un or ober j	
(If name unavailable, enter al	ternate name adopted for	the purpose of trai	nsacting business	in Florida. The altern	ate name must include "L	imited
Liability Company," "L.L.C."	or "LLC.")					
2. Ohio			81-4568112	(88)	r11 \	
(Jurisdiction under the law company is organized)	of which foreign limited I	lisbility		(FEI number, if app	icable)	
4	(Date first transa	cted business in F	lorida, if prior to :	registration.)		
	(See sections 605.0	904 & 605.0905.	F.S. to determine	penalty liability)		
5. 845 Claycraft Ave Ste	0					4 ) 
Gahanna, OH 43230						
	(Street A	Address of Principa	al Office)	`		M
6. 2148 E Eagle Pass					Ta U	
Wooster, OH 44691					100 Ai	
		(Mailing Address	<u> </u>		一部 2	
7. Name and street addres	ss of Florida registered			ble)	7	,
Name:	National Coporate R	-		,		
	115 N Cathourn St Suite #4					
Office Address:	T-11-h		<del></del>	. 22201		
	Tallahassee			, Florida 32301		
Registered agent's accep	tance.	(City)		(Zip co	oae)	
Having been named as re designated in this applica to complywith the provisi accept the obligations of t	gistered agent and to dition, I hereby accept to ons of all statutes relat	he appointment tive to the prope	as registered ag	ent and agree to a	ct in this capacity. I fu	rther agree
	Michelle V	Jalker	tert. =	every	<u> </u>	
	•	(Registered ag	ent's signature)		)	
8. The name, title or capa	acity and address of the	e person(s) who l	nas/have authori	ty to manage is/are	:	
Gary N Underhill manag	·	-		-		
	010010101					
	_			_		
9. Attached is a certificate jurisdiction under the law of the translator must be st	of which it is organized	d. (If the certificate)		n language, a transl		
This document is every	l in accordance with	_	·		that any false informer:	00
This document is executed submitted in a document to						UII

Typed or printed name of signee

Gary N Underhill

# 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 EZ PAY BUILDINGS 9, LLC, an Ohio For Profit Limited Liability Company, Registration Number 3959503, was organized within the State of Ohio on November 14, 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 13th day of March, A.D. 2017.

**Ohio Secretary of State** 

for Hostel

Validation Number: 201707202588