# 1900000111

(Re	equestor's Name)					
(Address)						
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(City/State/Zip/Phone #)						
PICK-UP	WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	_ Certificates	s of Status				
Special Instructions to Filing Officer:						
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03/24/17--01009--005 \*\*125.00

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#### FLORIDA DEPARTMENT OF STATE Division of Corporations

March 27, 2017

ASHLEY WEIS 5252 MONROE ST, 2ND FLOOR TOLEDO, OH 43623

SUBJECT: MP MANAGEMENT #3, LLC

Ref. Number: W17000026326

We have received your document for MP MANAGEMENT #3, 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):

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$638.75.

There is a balance due of \$638.75.

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.

Yasemin Y Sulker Regulatory Specialist II

Letter Number: 617A00005823

#### **COVER LETTER**

, ;

TO:	Registration Section Division of Corporation	as			
SUBJE	MP Management #3	, LLC			
SCDSI		Name of I	Limited Liability Co.	mpany	
				on to Transact Business in Florida," Certifi liability company to transact business in	
Please	eturn all correspondence c	oncerning this matter to the	following:		
	Ashley Weis				
	<del></del>	Na	me of Person		
	Marco's Franch	ising, LLC			
Firm/Company					
	5252 Monroe S	t., 2nd Floor			
Address					
	Toledo, OH 43	623			
City/State and Zip Code					
	aweis@marcos.c	om			
		E-mail address: (to be used	for future annual re	port notification)	
For fur	er information concerning	g this matter, please call:			
	Ashley Weis		419 at ( )	930-3102	
	Name o	f Contact Person	Area Code	Daytime Telephone Number	
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314		R С 2	TREET ADDRESS: Division of Corporations Registration Section Clifton Building 661 Executive Center Circle Callahassee, FL 32301	
Enclos	d is a check for the follow \$125.00 Filing Fee	ing amount:  \$\Bigcup \text{\$\frac{1}{2}\$ \$130.00 Filing Fee & Certificate of Status}\$	□ \$155.00 Filing Certified Copy	Fee & ☐ \$160.00 Filing Fee, Certifica of Status & Certified Copy	te

### 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:

MP Management #3, Ll				
(Name of Fore	ign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or	LLC.")		-
(If name unavailable, enter altability Company," "L.L.C,"	ternate name adopted for the purpose of transacting business in Florida. The alternate name	e must inclu	de "Lir	nited
2. Ohio	<sub>3</sub> 20-3714061			
(Jurisdiction under the law company is organized)	of which foreign limited liability (FEI number, if applicable)			_
4. July 25, 2016				
	(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)			
5. 5252 Monroe St., 2nd				
Toledo,OH 43623				
	(Street Address of Principal Office)	•		
6. 5252 Monroe St., 2nd F	Floor		17	
Toledo, OH 43623		1 a	A.PR	
	(Mailing Address)	50.5		٠.
7. Name and street addres	s of Florida registered agent: (P.O. Box NOT acceptable)	20 / 07 / 07 /		· · · · · · · · · · · · · · · · · · ·
Name:	Corporation Service Company		强	
Office Address:	1201 Hays Street	92.E	₩.	
	Tallahassee , Florida 32301 (City) (Zip code)	7-		
	(City) (Zip code)	•		
designated in this applicate to complywith the provision	gistered agent and to accept service of process for the above stated limited liabilition, I hereby accept the appointment as registered agent and agree to act in this ons of all statutes relative to the proper and complete performance of my duties my position as registered agent.  May Bytt Assistment Secretical agent's signature)	s capacity. and I am	I furt	her agree
9 The name title on some				
="	icity and address of the person(s) who has/have authority to manage is/are:	LLC		
John A. Butorac, Jr., Presi	ident of J. Anthony Management, Inc., which is Manager of MP Management #3,	LLC		
9. Attached is a certificate jurisdiction under the law of the translator must be su	of existence, no more than 90 days old, duly authenticated by the official having of which it is organized. (If the certificate is in a foreign language, a translation of abmitted)  Signature of an authorized person	custody of the certific	record: cate un	s in the der oath
	I in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any the Department of State constitutes a third degree felony as provided for in s.817 John A. Butorac, Jr.		mation	1

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 MP MANAGEMENT #3, LLC, an Ohio Limited Liability Company, Registration Number 1576884, was organized within the State of Ohio on October 24, 2005, 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 23rd day of March, A.D. 2017.

**Ohio Secretary of State** 

for Hasted

Validation Number: 201708201446