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COVER LETTER
. U: Registration Section
Division of Corporations
LDW Group LLC
sUBJECT:
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:
Linda D. Woodard
Name of Person
LDW Group LLC
Firm/Company
P.O. Box 603626
Address
Cleveland, OH 44103
City/State and Zip Code
linda@kdwgroup.biz
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Linda D. Woodard 216 496-4598 at ()
Name of Contact Person Area Code Daytime Telephone Number
MAILING ADDRESS: STREET ADDRESS:
Division of Corporations Division of Corporations
Registration Section Registration Section P.O. Box 6327 Clifton Building
Tailahassee, FL 32314 2661 Executive Center Circle Tailahassee, FL 32301
Enclosed is a check for the following amount:
□ \$125.00 Filing Fee □ \$130.00 Filing Fee & □ \$155.00 Filing Fee & 5160.00 Filing Fee, Certificate Certificate of Status Certified Copy of Status & Certified Copy

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IN COMPLIANCE WITH SECTION 605.002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

LDW Group LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

Ohio	_ 27-05554729	
(Jurisdiction under the law	of which foreign limited liability 3. 27-05554729 (FEI t	number, if applicable)
company is organized)		
7-9-2009	(Date first transacted business in Florids, if prior to registrat	ition)
	(Date first transacted business in Florida, if prior to registrat (See sections 605.0904 & 605.0905, F.S. to determine penalty	/ liability)
	·	
10498 Summer Breeze	Drive East, Jacksonville, FL 32218	
	(Street Address of Principal Office)	<u> </u>
	Drive East, Jacksonville, FL 32218 (Mailing Address)	<u>S</u>
	-	
iname and street addres	ss of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)	
Name:	Linda Woodard	
Office Address:	14098 Summer Breeze Drive East	
	Jacksonville	., 32218
	(City)	(Zip code)
egistered agent's accep		
esignated in this applica	gistered agent and to accept service of process for the above tion, I hereby accept the appointment as registered agent and	
esignated in this applica complywith the provisi- ccept the obligations of the obligation of the	tion, I hereby accept the appointment as registered agent and one of all statutes relative to the proper and complete/perform my position as registered agent. (Registered agent's signature) acjty and address of the person(s) who has/have authority to m	mance of mythuties, and I and familiar with TAAL WHOW
esignated in this applica complywith the provisi- ccept the obligations of UNA DECENTION OF COMPLETE C	tion, I hereby accept the appointment as registered agent and one of all statutes relative to the proper and complete/perform my position as registered agent. (Registered agent's signature) acity and address of the person(s) who has/have authority to man (Resistered agent's signature)	mance of mythuties, and I and familiar with TAAL WHOW
esignated in this applica complywith the provisi- ccept the obligations of UNA DECENTION OF COMPLETE C	tion, I hereby accept the appointment as registered agent and one of all statutes relative to the proper and complete/perform my position as registered agent. (Registered agent's signature) acity and address of the person(s) who has/have authority to make the person of the perso	mance of myliluties, and I am familiar with Market William Market warage is/are:
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esignated in this applica complywith the provisi- ccept the obligations of the obligations of the name, title or capa inda D. Woodard 4098 Summer Breeze Dr	tion, I hereby accept the appointment as registered agent and one of all statutes relative to the proper and complete/perform my position as registered agent.	the official having custody of records in the
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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 LDW GROUP LLC, an Ohio For Profit Limited Liability Company, Registration Number 1867440, was organized within the State of Ohio on July 1, 2009, 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 28th day of April, A.D. 2017.

" Hasted

Ohio Secretary of State

Validation Number: 201711804086