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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

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MAIL

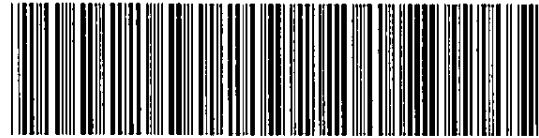
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OCT 03 2017

J SHIVERS

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:

1. Noggin LLC
(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 (Jurisdiction under the law of which foreign limited liability company is organized) 3. 46-2936152 (FEI number, if applicable)

4. 9/28/2017
(Date first transacted business in Florida, if prior to registration.)
 (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. _____ <small>(Street Address of Principal Office)</small>	6. <u>Noggin LLC</u> <small>(Mailing Address)</small>
<u>3500 Lorain Ave, Suite 300</u>	<u>3500 Lorain Ave, Suite 300</u>
<u>Cleveland, OH 44113</u>	<u>Cleveland, OH 44113</u>

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

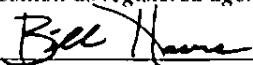
Name: Registered Agents Inc.

Office Address: 3030 N. Rocky Point Dr, Suite 150A

Tampa, Florida 33607
(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 comply with 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.


(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<u>Director of Operations</u>	<u>David Yeager</u> <small>1794 W 52nd Street Cleveland, OH 44102</small>	_____	_____
<u>CEO</u>	<u>Diane Yeager</u> <small>1794 W 52nd Street Cleveland, OH 44102</small>	_____	_____

(Use attachments if necessary)

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)

10. 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.

Signature of an authorized person

David Yeager
Typed or printed name of signee

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(Street Address of Principal Office)
Cleveland, OH 44113

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Bill Name
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<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>
<u>Director of Operations</u>	<u>David Yeager</u> <small>1794 W 52nd Street Cleveland, OH 44102</small>	
<u>CEO</u>	<u>Diane Yeager</u> <small>1794 W 52nd Street Cleveland, OH 44102</small>	

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David Yeager
Signature of an authorized person

David Yeager
Typed or printed name of signer

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 NOGGIN LLC, an Ohio For Profit Limited Liability Company, Registration Number 2207085, was organized within the State of Ohio on June 13, 2013, 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 September, A.D. 2017.

Jon Husted

Ohio Secretary of State

Validation Number: 201727101272