

M17000010442

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

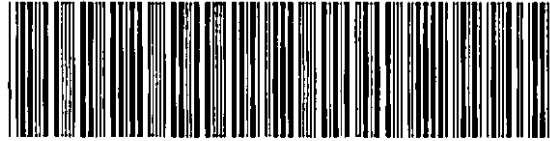
(Business Entity Name)

(Document Number)

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17 DEC 11 AM 2:56
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FILED

J. LEGGETT
DEC 11 2017

W17000095141



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 30, 2017

BENJAMIN F ROBERTS
3336 HIGHCREST COURT
DAYTON, OH 45405-2020 US

SUBJECT: BREA'S SAFETY PRODUCTS, LLC
Ref. Number: W17000095141

We have received your document for BREA'S SAFETY PRODUCTS, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to s.605.0902(1)(e), Florida Statutes, the document must contain the name, title or capacity and address of at least one person who has the authority to manage the foreign limited liability company.

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return the corrected original and one copy of 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.

Judy A Leggett
Regulatory Specialist II
Registration Section

Letter Number: 517A00024199

2017 DEC 11 AM 1:04

MAIL ROOM

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. Brea's Safety Products, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "L.I.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 "L.I.C.")

2. State of Ohio (Jurisdiction under the law of which foreign limited liability company is organized) 3. 30-0453887 (FEI number, if applicable)

4. January 5, 2018
(Date first transacted business in Florida, if prior to registration)
 (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 3336 Higherest Court (Street Address of Principal Office) 6. 3336 Higherest Court (Mailing Address)
Dayton, OH 45405-2020 Dayton, OH 45405

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

Name: Janice R. Nelson
 Office Address: 4022 Muirfield Ct.
Jacksonville , Florida 32225
(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.

Janice R. Nelson
(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>General Manager</u>	<u>Benjamin F. Roberts</u> <u>3336 Higherest Court</u> <u>Dayton, OH 45405-2020</u>		

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 DEPT. OF STATE
 TALLAHASSEE, FLORIDA

(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.

Benjamin F. Roberts
Signature of an authorized person

Benjamin F. Roberts
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 BREA'S SAFETY PRODUCTS, LLC, an Ohio Limited Liability Company, Registration Number 1738219, was organized within the State of Ohio on November 7, 2007, 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 17th day of November, A.D. 2017.

Jon Husted

Ohio Secretary of State

Validation Number: 201732102190