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D. SCOTT July 1 July



January 5, 2018

JOSEPH A ZINGALES 11378 PELICAN COVE PAINESVILLE, OH 44077

SUBJECT: JOSEPH A ZINGALES LLC

Ref. Number: W17000098451

We have received your document for JOSEPH A ZINGALES 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):

You only need one registered agent listed on #7 of the application.

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.

Dionne M Pijeaux Regulatory Specialist

Letter Number: 818A00000352

RECEIVED
JAN 2 3 2018

Enclosed is the new form. Thank you!

## 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:

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must includ Liability Company, "LLC." or "LLC.")  2 Ohio  (Durisfiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)  4. N/A  (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)  5. 4851 Tamiami Tr N #200  Naples FI. 34103  (Street Address of Principal Office)  6. 11378 Pelican Cove  Painesville OH 44077  (Mailing Address)  7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name:  Office Address:  (City)  Registered agent's acceptance:  Having been named as registered agent and to accept service of process for the above stated limited liability company designated in this application, I hereby accept the appointment as registered agent and upree to act in this capacity, to complywith the provisions of all statutes relative to the proper and complete performance of my duties, and I am facecept the obligations of my position as registered agent.  (Registered agent's signalure)  8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:  Joseph A Zingales, Broker  11378 Pelican Cove  Painesville OH 44077  9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of te purisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate purisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate purisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate purisdiction under the law of which it is organized.					
(Jurisdiction under the law of which foreign limited liability company is organized)  N/A  (Date first transacted business in Florida, if prior to registration.)  (See sections 603.0904 & 603.0905, F.S. to determine penalty liability)  4851 Tamiami Tr N #200  Naples FL 34103  (Street Address of Principal Office)  11378 Pelican Cove  Painesville OH 44077  (Mailing Address)  7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name:  Office Address:  Office Address:  (City)  (Registered agent and agree to act in this capacity, and I aim for a complywith the provisions of all statutes relative to the proper and complete performance of my duties, and I aim for a complywith the provisions of my position as registered agent.  (Registered agent)  (Registered ag	de "Limited	nust inclu	ess in Florida. The alternate name		
Comply is organized)  N/A  (Date first transacted business in Florida, if prior to registration.)  (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)  4851 Tamiami Tr N #200  Naples FI. 34103  (Street Address of Principal Office)  Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name:  Office Address:  Name and street address:  (City)  Naples  (City)  Registered agent's acceptance:  Paving been named as registered agent and to accept service of process for the above stated limited liability company lesignated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. In complying the provisions of all statutes relative to the proper and complete performance of my duties, and I aim for 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:  loseph A Zingales, Broker  11378 Pelican Cove  Painesville OH 44077				3. N/A	Ohio
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)  4851 Tamiami Tr N #200  Naples FI. 34103  (Street Address of Principal Office)  11378 Pelican Cove  Painesville OH 44077  (Mailing Address)  Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name: 4851 Tamiami Tr N #200  Naples Florida 34103  (City)  Registered agent's acceptance: (City)  Registered agent and as registered agent and to accept service of process for the above stated limited liability company to complywith the provisions of all statutes relative to the proper and complete performance of my duties, and I am for accept the obligations of my position as registered agent.  (Registered agent's signature)  3. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: loseph A Zingales, Broker  [1378 Pelican Cove]  Painesville OH 44077  Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of registered agent and control of the official having custody of registered agent accept the official having custody of registered agent and control of the official having custody of registered agent and control of the proper and complete performance of my duties, and I am for the obligations of my position as registered agent.	<del></del>		(FEI number, if applicable)	which foreign limited liability	
(Date first transacted business in Florida, if prior to registration.) (See sections 605,0904 & 605,0905, F.S. to determine penalty liability)  4851 Tamiami Tr N #200  Naples FI. 34103  (Street Address of Principal Office)  11378 Pelican Cove  Painesville OH 44077  (Mailing Address)  Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name:  Office Address:  4851 Tamiami Tr N #200  Naples  (City)  (City)  Registered agent's acceptance:  Having been named as registered agent and to accept service of process for the above stated limited liability company to complying the his application, I hereby accept the appointment as registered agent and agree to act in this capacity. It is complying 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: loseph A Zingales, Broker  11378 Pelican Cove  Painesville OH 44077					N/A
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(Street Address of Principal Office)  11378 Pelican Cove  Painesville OH 44077  (Mailing Address)  Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name:					Naples El 34103
Painesville OH 44077  (Mailing Address)  Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name:  Office Address:    A851 Tamiami Tr N #200			···	(Street Address of Principal Office)	Naples 11, 34105
(Registered agent and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name:  Office Address:  Naples  (City)  Registered agent's acceptance:  Invited been named as registered agent and to accept service of process for the above stated limited liability company, estignated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity, or complywith the provisions of all statutes relative to the proper and complete performance of my duties, and I am for complete obligations of my position as registered agent.  (Registered agent's signature)  3. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:  oseph A Zingales, Broker  1378 Pelican Cove  Painesville OH 44077  Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of registered agent.				·	11378 Pelican Cove
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Office Address:    Name:   4851 Tamiami Tr N #200			4.11.)	ertaile a les alors de CDO Deu Nort	Nt
Office Address:    Naples   Florida   34103		20.	praore)	- A + I - 7/	Name and street address
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(City)  (Zip code)  (Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of recommendation.	10 AM	Z		851 Tamiami Tr N #200	Office Address:
Registered agent's acceptance:  Idaving been named as registered agent and to accept service of process for the above stated limited liability company esignated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. In complywith the provisions of all statutes relative to the proper and complete performance of my duties, and I am for accept the obligations of my position as registered agent.  (Registered agent's signature)  3. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:  oseph A Zingales, Broker  1378 Pelican Cove  Painesville OH 44077  Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of respect to the provision of the person of the	· .1	(4)	, Florida 34103	Naples	
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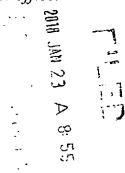
Typed or printed name of signee

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.

Joseph A Zingales

## 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 JOSEPH A ZINGALES LLC, an Ohio For Profit Limited Liability Company, Registration Number 4079720, was organized within the State of Ohio on October 4, 2017, is currently in FULL FORCE AND EFFECT upon the records of this office.



SECRETAR OF STATE OF

Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 2nd day of January, A.D. 2018.

**Ohio Secretary of State** 

Jon Hastel

Validation Number: 201800203784