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SEURETARY OF STATE

D. BRUCE AUG 0 7 2018



**Division of Corporations** 

July 21, 2018

MILES P. WELO MANSOUR GAVIN LPA 1001 LAKESIDE AVE., STE 1400 CLEVELAND, OH 44114

SUBJECT: HLBC LLC

Ref. Number: W18000066668

We have received your document for HLBC 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):

The registered agent must sign accepting the designation.

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 Fall (850) 245-6051.

Deborah Bruce Corporate Records Supervisor ng of your document, please Feall AUG - AU

## COVER LETTER

TO:	Registration Section Division of Corporations
SUBJ	HLBC LLC
0013	Name of Limited Liability Company
	closed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of ce, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.
Please	eturn all correspondence concerning this matter to the following:
	Miles P. Welo
	Name of Person
	Mansour Gavin LPA
	Firm/Company
	1001 Lakeside Ave., Suite 1400
	Address
	Cleveland, Ohio 44114
	City/State and Zip Code
	inwelokanggampa.com
For fu	E-mail address: (to be used for future annual report notification) her information concerning this matter, please call:
	Name of Contact Person Area Code Daytime Telephone Number
	MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301
Enclos	d is a check for the following amount:    \$\B \$125.00 \text{ Filing Fee}  \Box \$130.00 \text{ Filing Fee & }  \Box \$155.00 \text{ Filing Fee & }  \Box \$160.00 \text{ Filing Fee, Certificate } \text{ Certified Copy } \text{ of Status & Certified Copy } \end{array}

## 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:

Ohio	name adopted for the purpose of transacting business in I			
Ohio	7 - F - F - 1 - 1 - 1 - 1 - 1	3	(00)	nber, if applicable)
(Jamidiction under the law of w	thich foreign limited liability company is organized)		(FEI nun	nber, il appricable)
	(Date first transacted business in Florida, if prior (See sections 605.0904 & 605.0905, F.S. to deter	to registration.) mine penalty liability)		
8600 Midnight Pass R	oad #504	6.		
(Street Address of	Principal Office)	·	(Mailing Ad	dress)
Sarasota, FL 34202		·	<del></del>	
				<u> </u>
Name and street addre	ss of Florida registered agent: (P.O. Bo	ox <u>NOT</u> accepto	ible)	AH NG
Name:	C T Corporation System		_	25日 上
	1200 South Pine Island Road		_	2 × 2
Office Address:	1200 South Fine Island Road		-	
	Plantation		, Florida <u>33324</u>	<b>!</b>
iving been named as re signated in this applica comply with the provis	(City)	as registered ager and complete	(Zip co e above stated limite gent and agree to ac e performance of my	d liability company at the p t in this capacity. I further duties, and I am familiar
aving been named as re signated in this applice comply with the provis id accept the obligation	(City)  otance: egistered agent and to accept service of the oppointment ions of all statutes relative to the properties of my position as registered agent.  (Registered agent)	as registered ager and complete	(Zip co	d liability company at the p t in this capacity. I further duties, and I am familiar
signated in this applice comply with the provis ad accept the obligation	(City) otance: egistered agent and to accept service of ution, I hereby accept the appointment ions of all statutes relative to the prope	as registered ager and complete  All  signature)  has/have author	(Zip co	d liability company at the p t in this capacity. I further duties, and I am familiar
aving been named as resignated in this application comply with the provised accept the obligation.  The name, title or cap Title or Capacity:	(City)  otance: egistered agent and to accept service of attion, I hereby accept the appointment itons of all statutes relative to the properties of my position as registered agent.  (Registered agent active and address of the person(s) who Name and Address:	as registered ager and complete  All  signature)  has/have author	(Zip con example above stated limite gent and agree to act performance of my act of the control	d liability company at the p t in this capacity. I further duties, and I am familiar
wing been named as resignated in this application comply with the provising accept the obligation.  The name, title or cap	(City)  otance: egistered agent and to accept service of attion, I hereby accept the appointment itons of all statutes relative to the proposition as registered agent.  (Registered agent active and address of the person(s) who Name and Address:  Peter L. Snavely  8600 Midnight Pass Rd. #50	as registered ager and complete  All (1)  A signature)  has/have author  Title or	(Zip con example above stated limite gent and agree to act performance of my act of the control	d liability company at the p t in this capacity. I further duties, and I am familiar
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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 HLBC LLC, an Ohio For Profit Limited Liability Company, Registration Number 4138689, was organized within the State of Ohio on February 16, 2018, 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 10th day of July, A.D. 2018.

Ohio Secretary of State

for Hastel

Validation Number: 201819100966