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DIVISION OF CORPORATIONS

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: MINNOW PROPERTIES LLC Name of Limited Liability Company
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:
MARY ANN FISCHER Name of Person
MINNOW PROPERTIES LLC Firm/Company
3141 MAPLE AVE, NE
MILLERSPORT OHIO 43044 City/State and Zip Code
10 MURPHY 19 e 5BC GL0B4L, NET E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
MARY ANN FISCHER at (614) 270-3347 Name of Contact Person Area Code Daytime Telephone Number
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, F1, 323142661 Executive Center CircleTallahassee, F1, 32301
Enclosed is 7 check for the following amount: State of Status State of S

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLANCE WITH SECTION 605,0002, FLORIDA STATUTEN THE FOLLOWING IN SUBMITTED TO REGISTER A FOREIGN TAMITED LIMITED LIMITED 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 include "Limited Liability Company," "L.L.C." or "LLC.") (FEI number, if applicable) fed business in Florida, if prior to registration.) 0904 & 605 0905, F.S. to determine penalty liability.) (Street Address of Principal Office) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Office Address: 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: Title or Capacity: Name and Address: Name and Address: (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.

SECULIARY OF STATE

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA IN COMPLIANCE BITH STATION GRADER, FLORICH STATUTES THE FOLLOWING ESTEMATED TO RETAINER A FORECE LIMITED LUBELTY COMMUNICATION WITH STATE OF HURBA PROPERTIES registered agosts (P.O. Dox. NOT acceptable) 7. Name and spect address of 13 Registered agent's acceptance: Having been named as registered agent and to accept version 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 sentuers retailed to the proper and complete performance of my duties, and 8 am familier with and accept the obligations of my position as registered agent. \$. The rases, title or capacity and address of the pursue(s) who has have authority to enunge is bee: Name and Address: Title or Canacity: Name and Address: This or Copedity: (Use amothemus if notessary) 9. Attached is a certificate of existence, no more than 90 days old, duly authorized by the official baying custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign impage, a translation of the certificate scalar outh of the translator mest be statemed) 10. This document is executed in accordance with section 605.0003 (1) (b), Florida Statutes. I am aware that any false information submitted in a documers to the Department of State constituers a third degrey cleary as 1909 ided for in 1.217.155, F.S.

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 MINNOW PROPERTIES LLC, an Ohio For Profit Limited Liability Company, Registration Number 1793245, was organized within the State of Ohio on July 11, 2008, 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 14th day of November, A.D. 2018.

Ohio Secretary of State

for Hostel

Validation Number: 201831801218