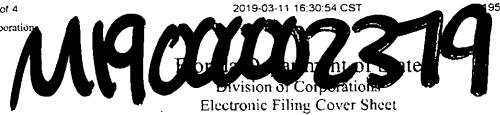
Division of Corporation



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

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Account Name : C T CORPORATION SYSTEM

Account Number : FCA0000000023 Phone : (614)280-3338 Fax Number : (954)208-0845

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

Foreign Limited Liability Company **BROWN GIBBONS LANG & COMPANY LLC**

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Help

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

IN COMPLIANCE WITH SECTION 618.0902, FLORIDA STATUTES, THE FOULOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: 1. Brown Gibbons Lang & Company LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name pravailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate mane must include "Limited Liamlay Company," 2. Ohio Durstherion under the law of which foreign limited untility company is organized) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) C T Corporation System Name: 1200 South Pine Island Road Office Address: , Florida 33324 Plantation 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 relutive to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent. Christine Kelm C T Corporation System [1] Assistant Secretary 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Title or Capacity; Title or Capacity: Name and Address: Michael E. Gild (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.

Lynn Basconi

Typed or printed name of sincer

UNITED STATES OF AMERICA STATE OF OHIO OFFICE OF THE SECRETARY OF STATE

I, Frank LaRose, 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 BROWN GIBBONS LANG & COMPANY LLC, an Ohio Limited Liability Company, Registration Number 936049, was organized within the State of Ohio on March 25, 1996, 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 11th day of March, A.D. 2019.

Ohio Secretary of State

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Validation Number: 201907002254