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PICK-UP	☐ WAIT	MAIL
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2019 JUL 16 PM 4:27 SECRETARY OF STATE TALLAHASSEE, FLORIDA

FILED

19 JUL 16 MM 10: 50

Y SCOTT
JUL 17 2019

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 120000000195

REFERENCE: 842682 8186330

AUTHORIZATION :

COST LIMIT : \$\hat{\lambda}_{55,.00}

ORDER DATE : July 15, 2019

ORDER TIME : 5:36 PM

ORDER NO. : 842682-005

CUSTOMER NO: 8186330

FOREIGN FILINGS

NAME: B-REST, LLC

XXXX QUALIFICATION (TYPE: <u>LL</u>)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
PLAIN STAMPED COPY

__ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Robinson -- EXT# 62968

EXAMINER:

COVER LETTER

B U BJECT:	-Rest, LLC							
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					ration to Transact Busi ited liability company			
ease return al	I correspondence co	oncerning this matt	er to the follow	ing:				
	Debbie Brown							
			Name of	Person				
	B-Rest, LLC							
			Firm/Co	mpany		ΞS	2019	
	302 W. 3rd Stree	et, Suite 300				ECRE LLAH	INC 61	77
		<u></u> -	Addi	ess		ASS	91 JUL 1	
	Cincinnati, Ohio	45202				ARY OF ASSEE, F	PK	FILED
			City/State an	d Zip Code		STATE	4:27	D
	debbie.brown@eg					AGE.	27	
		E-mail address: (to	o be used for fu	ture annua	il report notification)			
r further info	rmation concerning	this matter, please	call:					
Debbi	e Brown		at (513	9641520			
	Name of	Contact Person		Arca Code	Daytime Telep	hone Numi	bcr	
Divisio Registr	ING ADDRESS: on of Corporations ration Section				STREET ADDRES Division of Corpora Registration Section	tions		
	ox 6327 assee, FL 32314				Clifton Building 2661 Executive Cen Tallahassee, FL 323			
	ed is a check for the make check payable			Γ OF STA	TE.			
_	25.00 Filing Fee	□ \$130.00 Fili	_	\$155.00	Filing Fee &	\$160.00 Fi		

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

IN COMPILANCE 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: B-Rest, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (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.C."." Ohio (Jurisdiction under the law of which foreign limited liability company is organized) (Date first transacted business in Florida, if print to registration.) (See sections 605,0904 & 605,0905, F.S. to determine penalty liability) 302 W. 3rd Street, Suite 300 302 W. 3rd Street, Suite 300 (Street Address of Principal Office) Cincinnati, Ohio 45202 Cincinnati, Ohio 45202 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Corporation Service Company Name: 1201 Hays Street

Registered agent's acceptance:

Office Address:

Tallahassee

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.

Roxanne Turner
Asst. Vice President

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity:	Name and Address:	Title or Capacity:	
Manager	Name: Gerald Erickson		Name: Michael Gerwert
Member	Address: 302 W. 3rd Street, Suite 300	☐ Member	Address: 302 W. 3rd Street, Suite 300
Authorized	Cincinnati, Ohio 45202	Authorized	Cincinnati, Ohio 45202
Person		Person	
Other	Other	Other	Other
☐Manager	Name: Nick Unkovic	Manager	Name: Cindy Rantanen
☐Member	Address: 302 W. 3rd Street, Suite 300	Member	Address: 302 W. 3rd Street, Suite 300
Authorized	Cincinnati, Ohio 45202	Authorized	Cincinnati, Ohio 45202
Person		Person	9 JUL CRETI AHA
Other	Other	Other	Ω ^D
			THOU THE FORE
Manager	Name:	Manager	Name: STATE 27
☐Member	Address:	Member	Address:
Authorized		☐ Authorized	
Person		Person	
Other	Other	Other	Other

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

- 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.

	55	
	Signature of an authorized person	
Nick Unkovic		
	Typed or printed name of signed	

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 B-REST, LLC, an Ohio For Profit Limited Liability Company, Registration Number 4282681, was organized within the State of Ohio on January 18, 2019, is currently in FULL FORCE AND EFFECT upon the records of this office.

UL 16 PM 4: 27
(ETARY OF STATE
A HASSEE. FLORIDA



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 10th day of July, A.D. 2019.

Ohio Secretary of State

I fore

Validation Number: 201919101234