

M19000007958

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

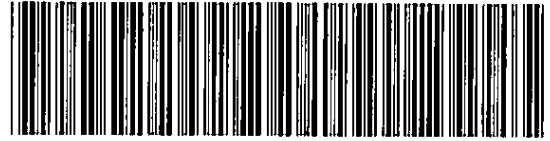
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

need RA, need CUS

W19-64268

Office Use Only



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2019 AUG 19 PM 12:59
RECEIVED

AUG 19 2019
M. SOLOMON



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 16, 2019

JASON SWAIN
1911 N. RIDGE ROAD EAST
LORAIN, OH 44055

SUBJECT: SWX CLEVELAND LLC
Ref. Number: W19000064268

We have received your document for SWX CLEVELAND LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

Stacy Prather
Regulatory Specialist III

Letter Number: 819A00014203

Aug 19 19 12:28p

Swx Cleveland

2026882676

p.2

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SWX CLEVELAND 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:

JASON SWAIN

Name of Person

SWX CLEVELAND LLC

Firm/Company

12045 GRAND KEMPSTON DR

Address

GIBSONTON, FL 33534

City/State and Zip Code

swxcleveland@gmail.com

E-mail address: (to be used for future annual report notification)

RECEIVED
19 AUG 19 4:10:50
SECRETARY OF STATE
TALLAHASSEE, FL

For further information concerning this matter, please call:

Jason Swain

813

557-3782

at ()

Name of Contact Person

Area Code

Daytime Telephone Number

MAILING ADDRESS:

Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$125.00 FIVE HUNDRED TWENTY FIVE AND NO/100 DOLLARS ☐ \$125.00 FIVE HUNDRED TWENTY FIVE AND NO/100 DOLLARS ☐ \$125.00 FIVE HUNDRED TWENTY FIVE AND NO/100 DOLLARS

**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:

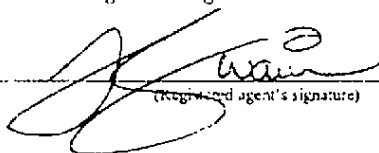
1. SWX CLEVELAND LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," 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," "LLC," or "LLC.")

2. Ohio
(Jurisdiction under the law of which foreign limited liability company is organized)3. 46-4136409
(FEI number, if applicable)4. JULY 2, 2019
(Date first transacted business in Florida, if prior to registration;
(See sections 605.0904 & 605.0905, F.S., to determine penalty liability)5. 12045 KEMPSTON DR
(Street Address of Principal Office)6. 12045 KEMPSTON DR
(Mailing Address)GIBSONTON, FL 33534GIBSONTON, FL 335347. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)Name: JASON SWAINOffice Address: 12045 KEMPSTON DRGIBSONTON, Florida 33534
(City) (Zip code)**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)

2019 AUG 19 PM 1:00

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:**

☒ Manager Name: JASON SWAIN

☐ Member Address: 1911 N. RIDGE RD EAST

☐ Authorized LORAIN, OHIO 44055

Person OWNER

☐ Other ☐ Other

Title or Capacity: **Name and Address:**

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other ☐ Other

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other ☐ Other

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other ☐ Other

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other ☐ Other

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

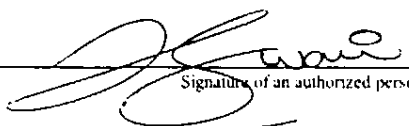
Person _____

☐ 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.


Signature of an authorized person

Jason Swain
Typed or printed name of signee

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 SWX CLEVELAND LLC, an Ohio For Profit Limited Liability Company, Registration Number 2246192, was organized within the State of Ohio on November 14, 2013, 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 19th day of August, A.D. 2019.*

A handwritten signature in cursive script, appearing to read "Frank LaRose".

Ohio Secretary of State

Validation Number: 201923101338