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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Tallhassee, FL 3230 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 891248 7608430

AUTHORIZATION :

COST LIMIT : \$ 125.00

ORDER DATE: August 20, 2019

ORDER TIME : 9:35 AM

ORDER NO. : 891248-150

CUSTOMER NO: 7608430

FOREIGN FILINGS

NAME: CAMUTO LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX ___ PLAIN STAMPED COPY

___ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Robinson -- EXT# 62968

EXAMINER:

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 COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA;

1. Camuto LLC (Name of Foreign Camuto 810 LLC	Limited Liability Company; must include "Limite	d Liability	Company," "L L.C.," or "LLC.")		
(If name unavailable, enter alternate)	name adopted for the purpose of transacting business in Fk	orida The alt	ernate name must include "Limited Liz	bility Company,"	"LLC." or	LLC.")
Ohio 2. (Junsdiction under the law of which foreign limited liability company is organized)		3.	83-2335045	ber, if applicable)		·
Upon filing				tier, if applicable)		
	(Date first transacted business in Florida, if prior to (See sections 605 0904 & 605 0905, F.S. to determ	registration, ine penalty l	ability)			
411 West Putnam Avenue, Suite 260 (Street Address of Principal Office)			411 West Putnam Aveni	West Putnam Avenue, Suite 260 (Mailing Address)		
(Street Address of	Principal Office)	•	(Mailing Add	ress)		_
Greenwich, CT 06830		-	reenwich, CT 06830			
. Name and street addre	ss of Florida registered agent: (P.O. Box	<u>NOT</u> ac	eceptable)	-	201	
Name:	Corporation Service Company			¥ ·	019 AUG	ار ساد د
Office Address:	1201 Hays Street				26 AF	· ·
	Tallahassee		32301 , Florida	-3	AH 10: 1	بعد في . *
	(City)		(Zip code	:)	0	

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.

Corporation Service Company
By: Kegistered agenu's signature)

Elli King
Assistant VP

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: Name and Address: Name: DSW Shoe Warehouse, Inc. Manager Manager 411 West Putnam Avenue **■**Member ☐ Member Address: Suite 260, Greenwich, CT 06830 Authorized Authorized Person Person Other____ Other Other___ Other____ Manager Name: _____ Manager Manager Name: _____ Member Address: _____ Member Address: Authorized Authorized Person Person Other____ Other___ Other____ Other_ Name: _____ Manager ☐Member ☐ Member Address: ____ Address: Authorized Authorized Person Person 0 Other Other____ Other____ Other_ Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed 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. Michelle Krall

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 CAMUTO LLC, an Ohio For Profit Limited Liability Company, Registration Number 4244619, was organized within the State of Ohio on October 18, 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 20th day of August, A.D. 2019.

1 fore

Ohio Secretary of State

Validation Number: 201923202808