

md10000005774

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

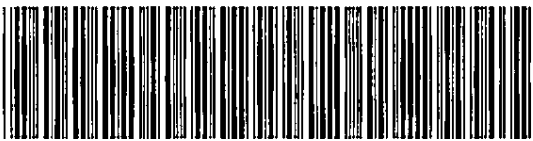
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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01/13/21--01012--017 **130.00

RECEIVED
21 JAN 13 PM 5:06
REGISTRY OF CORPORATIONS

JAN 21 2021

Cassandra A. Rice
Attorney
crice@porterwright.com

Porter Wright
Morris & Arthur LLP
One South Main Street
Suite 1600
Dayton, OH 45402

Direct: 937.449.6713
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January 5, 2021

CERTIFIED MAIL - RETURN RECEIPT REQUESTED

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

Re: Registration of Foreign Entity

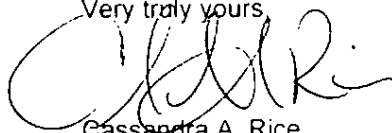
To Whom It May Concern:

Please find enclosed the Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida for the entity Roy G Biv's Retreat, LLC, as well as the following:

1. Ohio Articles of Incorporation
2. Ohio Certificate of Good Standing
3. A check in the amount of \$130.00 for Filing Fee and Certificate of Status.

Please do not hesitate to contact me if you have any questions or concerns.

Very truly yours,



Cassandra A. Rice

CAR:car
Enclosures

cc: Tami H. Kirby

14020035-1

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: ROY G BIV'S RETREAT, 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:

TAMI HART KIRBY, ESQ.
Name of Person

PORTER WRIGHT MORRIS & ARTHUR, LLP
Firm/Company

1 S MAIN STREET, STE 1600
Address

DAYTON, OHIO 45402
City/State and Zip Code

tkirby@porterwright.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

<u>Tami Hart Kirby, Esq.</u>	<u>937</u>	<u>449-6810</u>
Name of Contact Person	at () Area Code	Daytime Telephone Number

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

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

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

- \$125.00 Filing Fee \$130.00 Filing Fee & Certificate of Status \$155.00 Filing Fee & Certified Copy \$160.00 Filing Fee, Certificate of Status & Certified Copy

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. ROY G BIV'S RETREAT, 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 "LLC.")

2. STATE OF OHIO (Jurisdiction under the law of which foreign limited liability company is organized)
3. (FEI number, if applicable)

4. DECEMBER 29, 2020
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 525 MAYSFIELD ROAD
(Street Address of Principal Office)
OAKWOOD, OHIO 45419

6. 525 MAYSFIELD ROAD
(Mailing Address)
OAKWOOD, OHIO 45419

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: ACME Agent Florida LLC

Office Address: 9132 Strada Place, Third Floor

Naples, Florida 34108
(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.

Therese R. Walters

(Registered agent's signature)

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: John William Powell
 Member Address: 525 Maysfield Road
 Authorized Oakwood, Ohio 45419
 Person _____
 Other _____ Other _____

Title or Capacity: **Name and Address:**
 Manager Name: Shannon McGuire Powell
 Member Address: 525 Maysfield Road
 Authorized Oakwood, Ohio 45419
 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

Tami H Kirby, Esq.

Typed or printed name of signee



DATE	DOCUMENT ID	DESCRIPTION	FILING	EXPED	CERT	COPY
12/21/2020	202035604666	DOMESTIC FOR PROFIT LLC - ARTICLES OF ORG (LCP)	99.00	100.00	0.00	0.00

Receipt

This is not a bill. Please do not remit payment.

PORTER WRIGHT MORRIS & ARTHUR LLP
1 SOUTH MAIN STREET
SUITE 1600
DAYTON, OH 45402

**STATE OF OHIO
CERTIFICATE**

**Ohio Secretary of State, Frank LaRose
4588359**

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

ROY G. BIV'S RETREAT, LLC

and, that said business records show the filing and recording of:

Document(s)

DOMESTIC FOR PROFIT LLC - ARTICLES OF ORG
Effective Date: 12/21/2020

Document No(s):

202035604666



United States of America
State of Ohio
Office of the Secretary of State

Witness my hand and the seal of the
Secretary of State at Columbus, Ohio this
21st day of December, A.D. 2020.

Ohio Secretary of State

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 ROY G. BIV'S RETREAT, LLC, an Ohio For Profit Limited Liability Company, Registration Number 4588359, was organized within the State of Ohio on December 21, 2020, 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 23rd day of December, A.D. 2020.

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

Ohio Secretary of State

Validation Number: 202035800936