

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Port Charlotte GOVT Properties, 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:

John M. Hoty

Name of Person

Port Charlotte GOVT Properties, Ltd.

Firm/Company

5003 Milan Road

Address

Sandusky, OH 44870

City/State and Zip Code

jm@hoty.com

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

For further information concerning this matter, please call:

John M. Hoty

419

609-7000

at ()

Name of Contact Person

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. Port Charlotte GOVT Properties, 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. OH 86-3916980
(Jurisdiction under the laws of which foreign limited liability company is organized) (FEI number, if applicable)

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

5. 5003 Milan Road
(Street Address of Principal Office)

6. 5003 Milan Road
(Mailing Address)

Sandusky, OH 44870 Sandusky, OH 44870

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

Name: Camille J. Iurillo, Esq.

Office Address: 5628 Central Avenue

St. Petersburg 33707
(City) , Florida (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)

FILED
21 JUN - 7 AM 10:37
CLERK OF DISTRICT COURT
STATE OF FLORIDA

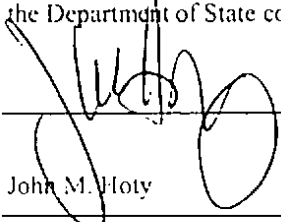
8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<input checked="" type="checkbox"/> Manager	Name: John M. Hoty	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: 5003 Milan Road	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	Sandusky, OH 44870	<input type="checkbox"/> Authorized	_____
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Manager	Name: _____	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: _____	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	_____	<input type="checkbox"/> Authorized	_____
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Manager	Name: _____	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: _____	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	_____	<input type="checkbox"/> Authorized	_____
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> 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
John M. Hoty

Typed or printed name of signee



DATE	DOCUMENT ID	DESCRIPTION	FILING	EXPED	CERT	COPY
05/18/2021	202113701920	DOMESTIC FOR PROFIT LLC - ARTICLES OF ORG (LCP)	99.00	0.00	0.00	0.00

Receipt

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

KRIS ANN PUCKRIN
5003 MILAN ROAD
SANDUSKY, OH 44870

**STATE OF OHIO
CERTIFICATE**

Ohio Secretary of State, Frank LaRose
4680732

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

PORT CHARLOTTE GOVT PROPERTIES, LTD

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

Document(s)

DOMESTIC FOR PROFIT LLC - ARTICLES OF ORG

Effective Date: 05/17/2021

Document No(s):

202113701920



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
18th day of May, A.D. 2021.

Ohio Secretary of State

RESOLUTION
Port Charlotte GOVT Properties, Ltd.

After a meeting duly noticed, the members of Port Charlotte GOVT Properties, Ltd. resolved as follows:

RESOLVED, that Port Charlotte GOVT Properties, Ltd. will adopt the assumed name of Port Charlotte GOVT Properties, LLC for the purposes of transacting business in the State of Florida in accordance with their Limited Liability Company Act of Section 605.0906.

Port Charlotte GOVT Properties, Ltd.

by /



John M. Hoty, Manager of
Port Charlotte GOVT Properties, Ltd.