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TO:

то:	Registration Section Division of Corporations	
SUBJI	Ironville Rail & Transfer LLC	
30031		me of Limited Liability Company
		y Company for Authorization to Transact Business in Florida," Certificate of referenced foreign limited liability company to transact business in Florid
Please	return all correspondence concerning this matter	to the following:
	Lynn Reardon, Senior Paralegal	
	-	Name of Person
	Squire Patton Boggs (US) LLP	
		Firm/Company
	201 E. Fourth Street, Suite 1900	
	· ·	Address
	Cincinnati, OH 45202	
		City/State and Zip Code
	alex.jolinson@midwestterminals.com	
	E-mail address: (to	be used for future annual report notification)
For fu	rther information concerning this matter, please c	eall:
	Lynn Reardon, Senior Paralegal	513 361-1259 at ( )
	Name of Contact Person	at () Area Code Daytime Telephone Number
	Mailing Address:	Street Address:
	Registration Section	Registration Section
	Division of Corporations	Division of Corporations
	P.O. Box 6327 Tallahassee, FL 32314	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810
	Tallallassee, PL 32314	Tallahassee, FL 32303
	Enclosed is a check for the following amount: Please make check payable to: FLORIDA DE  ☐ \$125.00 Filing Fee ☐ \$130.00 Filing F  Certificate	EPARTMENT OF STATE  Fee & □ \$155.00 Filing Fee & ☑ \$160.00 Filing Fee, Certificate

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

IN COMPLIANCE WITH SECTION 605,0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

L. Ironville Rail & Transfe	er LLC			
(Name of Foreign )	Limited Liability Company; must include "Limite	d Liability Company," "	'L.L.C.," or "LLC.")	
(If name unavailable, enter alternate n	ame adopted for the purpose of transacting business in F	orida. The alternate name i	nust include "Limited Liability C	ompany," "L.L.C," or "LLC,")
Ohio 2	nich foreign limited liability company is organized)	3	(FIH number, if app	
(Jurisdiction under the law of w	hich foreign limited hability company is organized)		(Fiti number, if apg	olicable)
4	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determ	registration)		
383 W. Dussel Drive		383 W. Du	issel Drive	
5. (Street Address of Principal Office)		O{{Mailing}}	(Address)	
Maumee, OH 43537		Maumee, (	OH 43537	<del>.</del>
				2023
7. Name and street address	s of Florida registered agent: (P.O. Bo)	NOT acceptable)		71 71 DEC 28
Name:	C T Corporation System	<u></u>		P
Office Address:	1200 South Pine Island Road			22
	Plantation	, FI	33324 orida	
	(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.

Ву:	Laura & Broserick	Laura R. Broderick, Assistant Secretary
	(Registered agent's st	enature)

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]:

. .

Fitle or Capacity:	Name and Address:	Title or Capacity:	Name and Address
<b>∄</b> Manager	Name: R. Alexander Johnson	□Manager	Name: Ohio Holdings, Inc.
<b>⊠</b> Member	Address: 383 W. Dussel Drive	✓Member	Address: 383 W. Dussel Drive
□Authorized	Maumee, OH 43537	□Authorized	Maumee, OH 43537
Person		Person	
Other	Other	□Other	
∐Manager	Name: Drew Johnson	□Manager	Name: Frederick Deichert
Member	Address: 283 W. Dussel Drive	<b>⊠</b> Member	Address: 383 W. Dussel Drive
∃Authorized	Maumee, OH 43537	□Authorized	Maumee, OH 43537
Person		Person	
Other	Other	□Other	Other
⊐Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
∃Authorized		□Authorized	
Person		Person	
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.

 Signature of an authorized person	
Signature of an authorized betson	

# 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 IRONVILLE RAIL & TRANSFER LLC, an Ohio Limited Liability Company, Registration Number 2428038, was organized in the State of Ohio on September 11, 2015, 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 28th day of December, A.D. 2023.

**Ohio Secretary of State** 

Fred Johne

Validation Number: 202336201504