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DATE: 02/02/3024

NAME: RITE-WAY COMPLIANCE GROUP LLC

TYPE OF FILING: APPLICATION BY FOREIGN LLC

COST: \$160

RETURN: CERTIFICATE OF STATUS & CERTIFIED COPY PLEASE.

AUTHORIZATION: ABBIE/PAUL HODGE

ACCOUNT: FCA000000015

#### **COVER LETTER**

TO:	Registration Section Division of Corporations						
SUBJE	RITE-WAY COMPLIANCE	E GROUP, LLC dba BMP COMPLIANCE GROUP, LLC					
		Name of Limited Liability Company					
The end Existend	closed "Application by Foreign Lince, and check are submitted to regi	nited Liability Company for Authorization to Transact Business in Florida," Certificate of ister the above referenced foreign limited liability company to transact business in Florida.					
Please r	return all correspondence concerni	ng this matter to the following:					
	SAM MCLEOD						
	Name of Person						
	RITE-WAY COMPLIANCE GROUP, LLC dba BMP COMPLIANCE GROUP, LLC						
		Firm/Company					
	300 E NAGHTEN ST						
Address							
	COLUMBUS, OH 43215						
	City/State and Zip Code						
	sam@fogbmp.com / don	@bmpcomp.com					
	E-mail	address: (to be used for future annual report notification)					
For furt	her information concerning this m	atter, please call:					
SAM MCLEOD		614 519-1769 at()					
	Name of Contac	t Person Area Code Daytime Telephone Number					
Mailing Address: Registration Section Division of Corporations P.O. Box 6327		Street Address: Registration Section Division of Corporations The Centre of Tallahassee					
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303					
	Enclosed is a check for the follow Please make check payable to: Fl	ving amount:  LORIDA DEPARTMENT OF STATE  30.00 Filing Fee & S155.00 Filing Fee & S160.00 Filing Fee, Certificate  Certificate of Status Certified Copy 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:

STATE OF OHIO  (Jurisdiction under the law of which foreign limited liability company is organized)  MAY 28, 2019  (Date first transacted business in Florida, if prio (See sections 605,0904 & 605,0905, F.S. to det	3. <u>46-0888</u>			
(Jurisdiction under the law of which foreign limited liability company is organized)  MAY 28, 2019  (Date first transacted business in Florida, if prio (See sections 605,0904 & 605,0905, F.S. to det	<u></u>	(FEI number, i	if applicable)	
(Date first transacted business in Florida, if prio (See sections 605,0904 & 605,0905, F.S. to det				<del>-</del>
(Date first transacted business in Florida, if prio (See sections 605,0904 & 605,0905, F.S. to det				
	or to registration.) cermine penalty liability)		<del></del>	
300 E NAGHTEN ST	SAME			
treet Address of Principal Office)	D(Mai	ing Address)		
COLUMBUS, OH 43215				
	<del></del>		<del>_</del>	<del></del>
				<del>3</del> 3
. Name and street address of Florida registered agent: (P.O. B	lox <u>NOT</u> acceptabl	e)		- 1
			, ta	j ⊆ 5. 
DOUGLAS C ROGERS Name:				
			=	
Office Address: 12320 VILLAGIO WAY			= = = = = = = = = = = = = = = = = = = =	
FT MYERS	· · · · · · · · · · · · · · · · · · ·	33912		
<u></u>	,	Florida		
(City)		(Zip code)		
Registered agent's acceptance:				
laving been named as registered agent and to accept service of esignated in this application, I hereby accept the appointmen	t as registered agen	it and agree to act in t	his canacity I	fuether agen
o comply with the provisions of all statutes relative to the prop nd accept the obligations of my posit <del>ion as regist</del> ered agent.	per and complete pe	rformance of my duti	es, and I am fai	niliar with

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:
□Manager	Name: DONALD C BLAIR	□Manager	Name: DOUGLAS C ROGERS
<b>■</b> Member	Address: 3781 KAUFFMAN RD	■Member	Address:12320 VILLAGIO WAY
□Authorized	CARROLL, OH 43112	□Authorized	FT MYERS, FL 33912
Person		Person	
□Other	Other	□Other	Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	
Other	Other	□Other	Other
<b>5.</b> 4			
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	<del></del>
Person		Person	
Other	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

DOUGLAS C ROGERS

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 RITE-WAY COMPLIANCE GROUP, LLC, an Ohio Limited Liability Company, Registration Number 2003140, was organized in the State of Ohio on March 7, 2011, 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 1st day of February, A.D. 2024.

Ohio Secretary of State

I flore

Validation Number: 202403200678