



THE UNITED STATES
CORPORATION
COMPANY

M98000000866

ACCOUNT NO. : 072100000032

REFERENCE : 907759 7084A

AUTHORIZATION :

Patricia Pigato

COST LIMIT : \$ ~~20.00~~

ORDER DATE : July 28, 1998

285.00

ORDER TIME : 2:31 PM

ORDER NO. : 907759-020

CUSTOMER NO: 7084A

CUSTOMER: Theoni Salotto, Esq
Bronson & Migliaccio
287 Bowman Avenue

398400041650
6/11/98

500002612285--B

Purchase, NY 10577

FOREIGN FILINGS

NAME: CAPITOL TALLAHASSEE, LLC

(5)

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Janice Vanderslice

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

*IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS
SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT
BUSINESS IN THE STATE OF FLORIDA:*

1. CAPITOL TALLAHASSEE, LLC
(Name of foreign limited liability company must end with the words "limited company" or their abbreviation "L.C." if not so contained in the name at present. Please note: "L.L.C." is not an acceptable suffix in Florida.)
2. OHIO 3. _____
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
4. JULY 15, 1998 5. FIFTY (50) YEARS
(Date of Organization) (Duration: Year limited liability company cease to exist or "perpetual")
6. UPON QUALIFICATION
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))
7. 1967 NEWARK-GRANVILLE RD., P.O. BOX 496
GRANVILLE, OHIO 43023
(Street address of principal office)

8. List name, title, and business address of each managing member[MGRM] or manager[MGR] who will manage the foreign limited liability company in Florida: (attach additional page if necessary)

NAME & ADDRESS:	TITLE:	NAME & ADDRESS:	TITLE:
<u>CAPITOL REALTY I, LLC</u>	<u>MANAGING MEMBER</u>	_____	_____
<u>1967 NEWARK-GRANVILLE RD.</u>		_____	
<u>GRANVILLE, OHIO 43023</u>		_____	
<u>MICHAEL J. MENZER</u>	<u>MEMBER</u>	_____	_____
<u>1967 NEWARK-GRANVILLE RD.</u>		_____	
<u>GRANVILLE, OHIO 43023</u>		_____	
_____		_____	
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**AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN
LIMITED LIABILITY COMPANY**

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The undersigned member or authorized representative of a member of _____
CAPITOL TALLAHASSEE, LLC _____ deposes and says:

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- 1) the above named limited liability company has at least two members
- 2) the total amount of cash contributed by the member(s) is \$ \$100.00
- 3) if any, the agreed value of property other than cash contributed by member(s) is
\$ 0 . . . A description of the property is attached and made a part hereto.
- 4) the total amount of cash or property anticipated to be contributed by member(s) is
\$ 100.00 . This total includes amounts from 2 and 3 above.

MICHAEL J. MENZER, MEMBER

Michael J. Menzer
Signature of a member or authorized representative of a member.
(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit
constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

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Filing Fee: \$ 52.50 for Affidavit

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES,
THE UNDERSIGNED LIMITED LIABILITY COMPANY, ORGANIZED UNDER THE LAWS OF
THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE
REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: CAPITOL TALLAHASSEE, LLC

2. The name and address of the registered agent and office is:

CORPORATION SERVICE COMPANY
(Name)

1201 HAYS STREET
(P.O. Box not acceptable)

TALLAHASSEE, FL 32301
(City/State/Zip)

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 certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

By: 

(Signature)

7/28/18

(Date)

Filing Fee: \$ 35 for Designation of Registered Agent

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UNITED STATES OF AMERICA,
STATE OF OHIO,
OFFICE OF THE SECRETARY OF STATE.

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I, Bob Taft, 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 corporations; that said records show CAPITOL TALLAHASSEE, LLC, an Ohio Limited Liability Company, was organized within the State of Ohio on July 15, 1998 and is currently in FULL FORCE AND EFFECT upon the records of this office.



WITNESS my hand and official
seal at Columbus, Ohio on
August 4, 1998

Bob Taft

Bob Taft
Secretary of State

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