

Jon Husted Ohio Secretary of State

180 East Broad Street, 16th Floor • Columbus, Ohio 43215 Toll Free: (877) SOS-FILE (767-3453) Central Ohio: (614) 466-3910 www.OhioSecretaryofState.gov • busserv@OhioSecretaryofState.gov

Please return the approval certificate to:

Name:	(Individual or Business Name)	
To the attention of:	(If necessary)	
Address:		
City:		
State:	ZIP Code:	
Phone Number:	E-mail Address:	

Check here if you would like to receive important notices via e-mail from the Ohio Secretary of State's office regarding Business Services.

Check here if you would like to be signed up for our Filing Notification System for the business entity being created or updated by filing this form. This is a free service provided to notify you via e-mail when any document is filed on your business record.

Type of Service Being Requested: (PLEASE CHECK ONE BOX BELOW)

Regular Service: Only the filing fee listed on page one of the form is required and the filing will be O processed in approximately 3-7 business days. The processing time may vary based on the volume of filings received by our office.

Expedite Service 1: By including an Expedite fee of \$100.00, **in addition** to the regular filing fee on page \bigcirc one of the form, the filing will be processed within 2 business days after it is received by our office.

Expedite Service 2: By including an Expedite fee of \$200.00, **in addition** to the regular filing fee on page one of the form, the filing will be processed within 1 business day after it is received by our office. This service is only available to walk-in customers who hand deliver the document to the Client Service Center.

Expedite Service 3: By including an Expedite fee of \$300.00, **in addition** to the regular filing fee on page one of the form, the filing will be processed within 4 hours after it is received by our office, if received by 1:00 p.m. This service is only available to walk-in customers who hand deliver the document to the Client Service Center.

Preclearance Filing: For the purpose of advising as to the acceptability of the proposed filing, a form that is to be submitted at a later date for processing may be submitted for examination for a fee of \$50.00. The Preclearance will be complete within 1-2 business days.



Form 533B Prescribed by: **Ohio Secretary of State JON HUSTED Ohio Secretary of State**

Central Ohio: (614) 466-3910 Toll Free: (877) SOS-FILE (767-3453) www.OhioSecretaryofState.gov Busserv@OhioSecretaryofState.gov

Mail this form to one of the following:

Regular Filing (non expedite) P.O. Box 670 Columbus, OH 43216

Expedite Filing (Two-business day processing time requires an additional \$100.00). P.O. Box 1390 Columbus, OH 43216

Registration of a Foreign Limited Liability Company

Filing Fee: \$125

CHECK ONLY ONE (1) BOX	
 (1) Registration of a Foreign For-Profit Limited Liability Company (106-LFA) ORC 1705 Jurisdiction of Formation 	(2) C Registration of a Foreign Nonprofit Limited Liability Company (106-LFA) ORC 1705 Jurisdiction of Formation
Date of Formation	Date of Formation
Name of Limited Liability Company in its jurisdiction of formation	tion

Name under which the foreign limited liability company desires to transact business in Ohio (if different from its name in its jurisdiction of formation) is:

Name must include one of the following words or abbreviations: "limited liability company," "limited," "LLC," "LLC," "Itd.," or "Itd"

The address to which interested persons may direct requests for copies of the limited liability company's operating agreement, bylaws, or other charter documents of the company is:

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	appoints the following as its agent upon whom process agains of Ohio. The name and complete address of the agent is	t the limited liability
Name		
Mailing Address		
City	State ZI	P Code
└── resident.	I and using a P.O. Box, check this box to confirm that the able bly consents to service of process on the agent listed above a	-
	and to service of process upon the Ohio Secretary of State if:	0
b. an agent is a	not appointed, or appointed but the authority of that agent has been revoked, or nnot be found or served after the exercise of reasonable dilige	ence.
By signing and submitting this form to has the requisite authority to execute	o the Ohio Secretary of State, the undersigned hereby certifies this document.	that he or she
Required		
Articles and original	Signature	
appointment of agent must be signed by a member,		
nanager or other epresentative.	By (if applicable)	
f authorized representative		
f authorized representative s an individual, then they nust sign in the "signature"	Print Name	
box and print their name		
n the "Print Name" box.	L Signature	
f authorized representative		
s a business entity, not an ndividual, then please print he business name in the	By (if applicable)	
signature" box, an		
authorized representative of the business entity nust sign in the "By" box	Print Name	
and print their name in the Print Name" box.		
	Signature]
	By (if applicable)	
	Print Name	

Instructions for Registration of a Foreign Limited Liability Company

This form should be used if you wish to register a foreign for-profit or nonprofit limited liability company to transact business in Ohio.

If you wish to register a foreign for-profit limited liability company, please select box 1. If you wish to register a foreign nonprofit limited liability company, please select box 2. Please complete the entire form (as required) whether you have selected box 1 or box 2. Pursuant to Ohio Revised Code §1705.54(A)(2), indicate the state in which the foreign limited liability company was organized and the date of its formation.

Name of Limited Liability Company

The name of the foreign limited liability company, as registered in its state of organization, must be provided. Pursuant to Ohio Revised Code §1705.05, the name used in Ohio must include one of the following: "limited liability company," "limited," "LLC," "LLC," "Itd." or "Itd".

Additional Provisions

If the information you wish to provide for the record does not fit on the form, attach additional provisions on a single-sided, 8 $\frac{1}{2}$ x 11 sheet(s) of paper.

Address to Contact

An address to which interested persons may direct requests for copies of the articles of organization, operating agreement, bylaws, or other charter documents of the company must be provided pursuant to Ohio Revised Code §1705.54(A) (5).

Original Appointment of Statutory Agent

Pursuant to Ohio Revised Code §1705.54(A)(3), a foreign limited liability company must appoint a statutory agent to accept service of process on behalf of the company. We cannot accept articles of organization unless the statutory agent information is provided. The statutory agent must be one of the following (1) an Ohio resident; (2) an Ohio corporation or (3) a foreign corporation that has a place of business and is licensed to do business in Ohio. An individual may be an agent and use a P.O. Box as the address, but in order to meet the required standard, the box must be checked to state the individual is a resident of the State of Ohio.

Consent Statement

Pursuant to Ohio Revised Code §1705.54(A)(4), by signing this document the limited liability company irrevocably consents to service of process upon the listed agent and to service of process upon the Ohio Secretary of State if an agent is not appointed, or an agent is appointed but the authority of that agent has been revoked, or the agent cannot be found or served after the exercise of due diligence.

Signature(s)

After completing all information on the filing form, please make sure that page 2 is signed by at least one authorized representative of the limited liability company.

**Note for Nonprofit LLCs

Filing with the Ohio Secretary of State's office is <u>not</u> sufficient to obtain state or federal tax exemptions. The Secretary of State does not grant tax exempt status. You must contact the Ohio Department of Taxation and the Internal Revenue Service to ensure that the nonprofit limited liability company secures the proper state and federal tax exemptions.

**Note: Our office cannot file or record a document which contains a social security number or tax identification number. Please do not enter a social security number or tax identification number, in any format, on this form.