DOC ID ----> 200405000452

DATE:	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
02/19/2004	200405000452	FOREIGN LICENSE/FOR-PROFIT (FLF)	125.00	.00	.00	.00	.00

Receipt

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

BUTLER OF COLUMBUS
150 E. MOUND ST #209
COLUMBUS, OH 43215

STATE OF OHIO

CERTIFICATE

Ohio Secretary of State, J. Kenneth Blackwell

1442383

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

WILDLIFE ADVENTURES OF OHIO, INC.

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

Document(s)	Document No(s):
FOREIGN LICENSE/FOR-PROFIT	**200405000452**

Authorization to transact business in Ohio is hereby given, until surrender, expiration or cancellation of this license.

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 17th day of February, A.D. 2004.

J. Kenneth Blackwell

Ohio Secretary of State

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Prescribed by **J. Kenneth Blackwell**
Ohio Secretary of State
Central Ohio: (614) 466-3910
Toll Free: 1-877-SOS-FILE (1-877-767-3453)

www.state.oh.us/sos
e-mail: busserv@sos.state.oh.us

Expedite this Form: (Select One)	
Mail Form to one of the Following:	
○ Yes	PO Box 1390 Columbus, OH 43216 *** Requires an additional fee of $100 ***
☑ No	PO Box 670 Columbus, OH 43216

FOREIGN CORPORATION APPLICATION FOR LICENSE OR REGISTRATION OF CORPORATION NAME

(For Foreign Profit or Non-Profit)

THE UNDERSIGNED HEREBY STATES THE FOLLOWING:

(CHECK ONLY ONE (1) BOX)

(1) Foreign Corporation	(2) Registration of Corporate Name by Unlicensed Foreign Corporation
☑ For Profit *(151-FLF)* ☐ Non-Profit *(152-FLN)* ORC 1703	☐ Original (158-RCO) ☐ Renewal (172-RNR (RCR)) ORC 1703 (Registration No.)
Filing Fee $125.00	**Filing Fee $50.00**

Complete the general information in this section for the box checked above.

Corporate Name: WILDLIFE ADVENTURES OF OHIO, INC.

Under the Laws of the State of: FLORIDA *(Home State)*

Date of Incorporation in Home State: 10-24-03 *(Date)*

The corporation's principal office is located at

5737 BARNHILL DRIVE
(Street) ***NOTE: P.O. Box Addresses are NOT acceptable.***

JACKSONVILLE *(City)* FLORIDA *(State)* 32207 *(Zip Code)*

The corporate purpose it proposes to exercise in the state of Ohio are as follows: (Please provide a brief but specific description; a general purpose clause is not sufficient)

RETAIL STORE SPECIALIZING IN EXOTIC ANIMALS

The corporation is carrying on or doing business.

☐ ***Check here if additional provisions are attached***

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SECRETARY OF STATE
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Complete the information in this section if box (1) is checked.

The corporation hereby appoints the following as its statutory agent upon whom process against the corporation may be served in Ohio

Butler of Columbus
(Name)

150 E. MOUND STREET, SUITE 208
(Street) *NOTE: P.O. Box Addresses are NOT acceptable.*

COLUMBUS *(City)* | Ohio *(State)* | 43215 *(Zip Code)*

The entity above irrevocably consents to service of process on the agent listed above as long as the authority of the agent continues, and to service of process upon the OHIO SECRETARY OF STATE if:

A. the agent cannot be found or
B. the above listed fails to designate another agent when required to do so, or
C. the above stated registration to do business in Ohio expires or is cancelled

Complete the information in this section if profit is checked in box (1).

The application is made to secure a ☑ permanent ☐ temporary license

The corporation's principal office within Ohio is to be located in ☐ Corporation will not have an office in Ohio

4311 MIDWAY MALL BLVD.
(Street) *NOTE: P.O. Box Addresses are NOT acceptable.*

ELYRIA *(City)* | LORAIN *(County)* | Ohio *(State)* | 44035 *(Zip Code)*

Has the corporation obtained a license to transact business in Ohio at any time in the past? ☐ Yes ☑ No
If yes, prior License No. _____ issued _____ *(Date)*

The date on which the corporation began transacting business in Ohio

☐ Date _____
OR
☑ Will begin business upon approval of application

Is this application being made to enable the corporation to prosecute or defend a legal action? ☐ Yes ☑ No

Complete the information in this section if non-profit is checked in box (1).

The location of its principal office in the state of Ohio is

_____
(Street) *NOTE: P.O. Box Addresses are NOT acceptable.*

_____ *(City)* | _____ *(County)* | Ohio *(State)* | _____ *(Zip Code)*

(Pursuant to ORC 1703.27 must have an Ohio address)

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SS.

IN WITNESS WHEREOF, the corporation has caused this application to be executed by an authorized officer on 2/6/04 (Date)

STATE OF FLORIDA

COUNTY OF DUVAL

LARRY WALLACH (Name of Officer), being first duly sworn, deposes and says that he/she is the PRESIDENT (title) of WILDLIFE ADVENTURES OF OHIO, INC. the corporation described in the foregoing application, and that the statements contained in said application are true and correct to the best of my knowledge and belief.

Signature: Larry Wallach

Name: LARRY WALLACH

Sworn to before me and subscribed in my presence, 2/6/04 (date)

Suzanne M. VanLeeuwen (Notary Public)

NOTARY SEAL

Suzanne M. VanLeeuwen
Commission # DD277010
Expires: Dec. 22, 2007
Aaron Notary 1-800-350-5161

Expiration date of Notary's Commission: 12/22/2007 (date)

DOC ID ----> 200405000452

State of Florida

Department of State

I certify from the records of this office that WILDLIFE ADVENTURES OF OHIO, INC., is a corporation organized under the laws of the State of Florida, filed on October 24, 2003.

The document number of this corporation is P03000119533.

I further certify that said corporation has paid all fees due this office through December 31, 2003, and its status is active.

I further certify that said corporation has not filed Articles of Dissolution.

Given under my hand and the Great Seal of the State of Florida at Tallahassee, the Capitol, this the Sixteenth day of February, 2004

Glenda E. Hood

Glenda E. Hood
Secretary of State

CR2EO22 (2-03)