DOC ID ----> 200904902882

DATE:	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
02/19/2009	200904902882	SUBSEQNT AGENT APPOINT/LIMITED/LIABILTY/PARTNER (LSA)	25.00	.00	.00	.00	.00

Receipt

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

WICKENS, HERZER, PANZA, COOK & BATISTA
35765 CHESTER ROAD
AVON, OH 44011-1262

STATE OF OHIO
CERTIFICATE
Ohio Secretary of State, Jennifer Brunner

1246774

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

ROOTWORKS, LLC

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

Document(s)	Document No(s):
SUBSEQNT AGENT APPOINT/LIMITED/LIABILTY/PARTNER	**200904902882**

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. 2009.

Ohio Secretary of State

DOC ID ----> 200904902882

Form 521 Prescribed by the:
Ohio Secretary of State

Central Ohio: (614) 466-3910
Toll Free: (877) SOS-FILE (767-3453)

www.sos.state.oh.us
Busserv@sos.state.oh.us

Expedite this form: (select one)
Mail form to **one** of the following:

○ Expedite — PO Box 1390, Columbus, OH 43216

*** Requires an additional fee of $100 ***

◉ Non Expedite — PO Box 788, Columbus, OH 43216

2009 FEB 17 PM 12:21

STATUTORY AGENT UPDATE

Filing Fee: $25

(CHECK ONLY ONE (1) BOX)

(1) Subsequent Appointment of Agent	(2) Change of Address of an Agent	(3) Resignation of Agent
☐ Corp (165-AGS)	☐ Corp (145-AGA)	☐ Corp (155-AGR)
☐ LP (165-AGS)	☐ LP (145-AGA)	☐ LP (155-AGR)
☑ LLC (171-LSA)	☐ LLC (144-LAD)	☐ LLC (153-LAG)
		☐ Partnership (155-AGR)

Name of Entity Rootworks, LLC

Charter, License or Registration No. 1246774

Name of Current Agent David J. Harris

Address of Current Agent 4506 Darrow Road
Mailing Address

Stow (City) | **Ohio** (State) | 44224 (Zip Code)

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

Name and Address of New Agent

Ronald M. Wolf, D.D.S., M.S.
Name of Agent

3611 Darrow Road
Mailing Address

Stow (City) | **Ohio** (State) | 44224-4012 (Zip Code)

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Complete the information in this section if box (1) is checked and business is an Ohio entity

ACCEPTANCE OF APPOINTMENT FOR DOMESTIC ENTITY'S AGENT

The Undersigned, Ronald M. Wolf, D.D.S., M.S. (Name of Agent), named herein as the

Statutory agent for, Rootworks, LLC (Name of Business Entity), hereby acknowledges

and accepts the appointment of statutory agent for said entity.

Signature: _____

Ronald M. Wolf, D.D.S., M.S. - Statutory Agent

☐ **If the agent is an individual using a P.O. Box, the agent must check this box to confirm that the agent is an Ohio resident.**

Complete the information in this section if box (2) is checked

New Address of Agent

_____
Mailing Address

_____ **Ohio** _____
City State Zip Code

☐ **If the agent is an individual using a P.O. Box, check this box to confirm that the agent is an Ohio resident.**

Complete the information in this section if box (3) is checked

The agent of record for the entity identified on page 1 resigns as statutory agent.

Current or last known address of the entity's principal office where a copy of this Resignation of Agent was sent as of the date of filing or prior to the date filed.

_____
Mailing Address

_____ **Ohio** _____
City State Zip Code

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By signing and submitting this form to the Ohio Secretary of State, the undersigned hereby certifies that he or she has the requisite authority to execute this document.

REQUIRED
Must be authenticated **(signed)** by an authorized representative **(See Instructions)**

Authorized Representative	Date: 1.31.09
Ronald M. Wolf, D.D.S., M.S. (Print Name)	
Authorized Representative	Date
Print Name	