



DATE:	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
04/15/2011	201110400630	FOREIGN/DESIGNATED APPOINTMENT OF AGENT (FGS)	25.00	.00		.00	.00

Receipt

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

BENESCH FRIEDLANDER COPLAN & ARONOFF LLP
ATTN: TRACEY HUGHEY
41 S. HIGH ST STE 2600
COLUMBUS, OH 43215

STATE OF OHIO CERTIFICATE

Ohio Secretary of State, Jon Husted**638442**

It is hereby certified that the Secretary of State of Ohio has custody of the business records for
BESTWAY SYSTEMS, INC.

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

Document(s)

Document No(s):

FOREIGN/DESIGNATED APPOINTMENT OF AGENT**201110400630**

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 13th day of April, A.D.
2011.

Ohio Secretary of State



**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
Bussserv@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

STATUTORY AGENT UPDATE

Filing Fee: \$25

(CHECK ONLY ONE (1) BOX)

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

Name of Entity	Bestway Systems, Inc.	RECEIVED SECRETARY OF STATE 2011 APR 13 AM 11:42 CLIENT SERVICE CENTER
Charter, License or Registration No.	638442	
Name of Current Agent	Charles B. Zellmer	

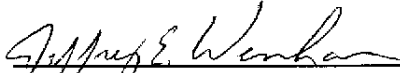
Complete the information in this section if box (1) is checked

Name and Address of New Agent	ACFB Incorporated		
	Name of Agent		
	200 Public Square, Suite 2300		
	Mailing Address		
	Cleveland	Ohio	44114
City	State	Zip Code	

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

Jeffrey E. Wenham, President

Print Name

March 21, 2011

Date

Authorized Representative

Date

Print Name