DOC ID ----> 201114701305

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| 05/31/2011 | 201114701305 | AMEND/ARTICLES-ORGANIZATION/DOM. LLC (LAM) | 50.00 | .00 | | .00 | .00 |

**Receipt**

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

GERALD L. BAKER ATTORNEY AT LAW
3711 WHIPPLE AVE. NW
CANTON, OH 44718

# STATE OF OHIO
## CERTIFICATE
### Ohio Secretary of State, Jon Husted

**947786**

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

**CDSF, LTD.**

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

| Document(s) | Document No(s): |
|---|---|
| **AMEND/ARTICLES-ORGANIZATION/DOM. LLC** | **201114701305** |

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 27th day of May, A.D. 2011.

Jon Husted

Ohio Secretary of State

DOC ID ----> 201114701305

**Prescribed by:**

The Ohio Secretary of State
Central Ohio: (614) 466-3910
Toll Free: 1-877-SOS-FILE (1-877-767-3453)

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

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# Domestic Limited Liability Company Certificate of Amendment or Restatement
**Filing Fee $50.00**

**(CHECK ONLY ONE (1) BOX)**

| (1) Domestic Limited Liability Company | (2) Domestic Limited Liability Company |
|---|---|
| ☑ Amendment (129-LAM)<br>7/19/1996<br>Date of Formation | ☐ Restatement (142-LRA)<br><br>Date of Formation |

The undersigned authorized representative of:

CDSF, Ltd.
Name of limited liability company

947786
Registration number

**If box (1) Amendment is checked, only complete sections that apply. If box (2) Restatement is checked, all sections below must be completed.**

The name of said limited liability company shall be:

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

2011 MAY 27 AM 11:26

This limited liability company shall exist for a period of: Perpetual
Period of Existence

Purpose

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

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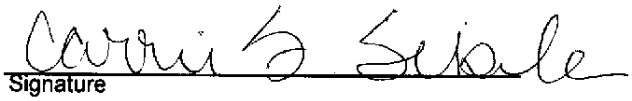
**REQUIRED**
Must be **(signed)** by a member, manager or other representative.



Signature

5/26/2011
Date

Douglas J. Sibila
Print Name



Signature

5/26/2011
Date

Carrie S. Sibila
Print Name

Signature

Date

Print Name