



DATE	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
09/08/2015	201524703128	FICTITIOUS NAME REGISTRATION (NFO)	50.00	0.00	0.00	0.00	0.00

Receipt

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

TAYLOR STEINHOFF
10312 LUMAN LANE
TWINSBURG, OH 44087

STATE OF OHIO CERTIFICATE

Ohio Secretary of State, Jon Husted
2426620

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

THE BUTCHER'S PANTRY

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

Document(s)

FICTITIOUS NAME REGISTRATION

Effective Date: 09/04/2015

Document No(s):

201524703128

Expiration Date: 09/04/2020

STEINHOFF PROVISIONS LLC
33475 STATION ST.
SOLON, OH 44139



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
8th day of September, A.D. 2015.

Ohio Secretary of State



Form 534A Prescribed by:

JON HUSTED
 OHIO SECRETARY OF STATE

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

www.OhioSecretaryofState.gov
busserv@OhioSecretaryofState.gov
File online or for more information: www.OHBusinessCentral.com

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

Name Registration

Filing Fee: \$50

CHECK ONLY ONE (1) Box

☐ Trade Name
 (167-RNO)
Date of first use:

MM/DD/YYYY

☒ Fictitious Name
 (169-NFO)

2015 SEP -4 AM 9:19

 The Butcher's Pantry
 Name being Registered or Reported

 Steinhoff Provisions LLC
 Name of the Registrant

Note: If the registrant is a partnership, please provide the name of the partnership. Individual partner names are not permitted but are required on page 2 of the form.

Registrant's Entity Number (if registered with Ohio Secretary of State):

2381798

All registrants must complete the information in this section

The general nature of business conducted by the registrant:

Retail butcher shop and grocery market

Business address:

33475 Station St

Mailing Address

Solon

City

OH

State

44139

Zip Code

Complete the information in this section if registrant is a partnership NOT registered in Ohio pursuant to ORC 1776, if partnership is registered, provide registration number on page one.

Provide the name and address of at least one general partner:

Name

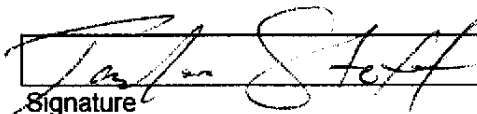
Address

NOTE: Pursuant to OAG 89-081, if a general partner is a foreign corporation/limited liability company, it must be licensed to transact business in Ohio; if a general partner is a foreign corporation/limited liability company licensed in Ohio under an assumed name, please provide the assumed name and the name as registered in its jurisdiction of formation.

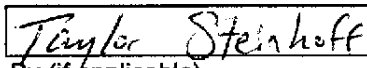
By signing and submitting this form to the Ohio Secretary of State, the undersigned hereby certifies that he or she has the requisite authority to execute this document.

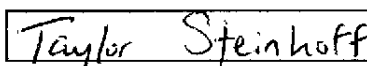
Required

Application must be signed by the registrant or an authorized representative.


Signature

If authorized representative is an individual, then they must sign in the "signature" box and print their name in the "Print Name" box.


By (if applicable)


Print Name

If authorized representative is a business entity, not an individual, then please print the business name in the "signature" box, an authorized representative of the business entity must sign in the "By" box and print their name in the "Print Name" box.