DOC ID ----> 201708104802

DATE	DOCUMENT ID	DESCRIPTION	FILING	OVER PAYMENT	EXPED	CERT	COPY
03/23/2017	201708104802	FICTITIOUS NAME REGISTRATION (NFO)	39.00	0.00	0.00	0.00	0.00

Receipt

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

FLOYD JONES
ATTN A JONES
26159 EUCLID AVE
EUCLID, OH 44132

STATE OF OHIO
CERTIFICATE

Ohio Secretary of State, Jon Husted
4007665

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

CHOICES LUXURY LOUNGE

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

Document(s)	Document No(s):
FICTITIOUS NAME REGISTRATION	**201708104802**

Effective Date: 03/20/2017

FLOYD JONES
26159 EUCLID AVE
EUCLID, OH 44132

Expiration Date: 03/20/2022

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 23rd day of March, A.D. 2017.

Jon Husted

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:

2017 MAR 20 AM 11:37

Name Registration

Filing Fee: $39

Form Must Be Typed

CHECK ONLY ONE (1) Box

☐ Trade Name (167-RNO)

Date of first use: _____ MM/DD/YYYY

☑ Fictitious Name (169-NFO)

CHOICES LUXURY LOUNGE
Name being Registered or Reported

FLOYD JONES
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): 3948047

All registrants must complete the information in this section

The general nature of business conducted by the registrant:

RESTAURANT AND BAR

Business address:

26159 EUCLID AVE.
Mailing Address

EUCLID
City

OH
State

44132
Zip Code

DOC ID ----> 201708104802

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
ALTHEA JONES	287 E. 270TH [illegible] 44132

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)

ALTHEA JONES
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.