DOC ID ----> 201709600138

| DATE | DOCUMENT ID | DESCRIPTION | FILING | OVER PAYMENT | EXPED | CERT | COPY |
|---|---|---|---|---|---|---|---|
| 04/06/2017 | 201709600138 | FICTITIOUS NAME REGISTRATION (NFO) | 39.00 | 0.00 | 100.00 | 0.00 | 0.00 |

**Receipt**

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

CT CORPORATION SYSTEM
ATTN: ERIC BROWN
4400 EASTON COMMONS WAY
COLUMBUS, OH 43219

# STATE OF OHIO
## CERTIFICATE

### Ohio Secretary of State, Jon Husted

**4013808**

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

**WALMART #5082**

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

| Document(s) | Document No(s): |
|---|---|
| **FICTITIOUS NAME REGISTRATION** | **201709600138** |

**Effective Date: 04/05/2017**

WAL-MART STORES, INC.
702 SW 8TH STREET
BENTONVILLE, AR 72716

Expiration Date: 04/05/2022

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 6th day of April, A.D. 2017.

Jon Husted

**Ohio Secretary of State**

DOC ID ----> 201709600138

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: $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)

Walmart #5082
Name being Registered or Reported

Wal-Mart Stores, Inc.
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): 688507

RECEIVED
2017 APR 5 PM 12:22
CLERK OF STATE
CLIENT SERVICE CENTER

**All registrants must complete the information in this section**

The general nature of business conducted by the registrant:

Retail Store Services

Business address:

702 SW 8th Street
Mailing Address

Bentonville
City

Arkansas
State

72716
Zip Code



OH014 - 9/23/2016 Wolters Kluwer Online

DOC ID ----> 201709600138

**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

By (if applicable)

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

Carol J Haggard
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.



OH014 - 9/23/2016 Wolters Kluwer Online