



DATE	DOCUMENT ID	DESCRIPTION	FILING	EXPED	CERT	COPY
01/18/2018	201801702660	DOMESTIC FOR PROFIT LLC - ARTICLES OF ORG (LCP)	99.00	0.00	0.00	0.00

Receipt

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

MILLIKIN & FITTON LAW FIRM
ATTN: VALERIE OWEN
9032 UNION CENTRE BLVD., SUITE 200
WEST CHESTER, OH 45069

STATE OF OHIO CERTIFICATE

Ohio Secretary of State, Jon Husted
4122669

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

NIEDERMAN FAMILY FARM, LLC

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

Document(s)

DOMESTIC FOR PROFIT LLC - ARTICLES OF ORG

Effective Date: 01/11/2018

Document No(s):

201801702660



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
18th day of January, A.D. 2018.

Ohio Secretary of State

01/11/2018 THU 11:05 FAX 513 863 0031 WC-CANON: IR-ADV6555

003/005



Form 533A Prescribed by:

JON HUSTED
 OHIO SECRETARY OF STATE

 Toll Free: (877) 803-FILE (877-767-3463)
 Central Ohio: (614) 486-3810

www.OhioSecretaryofState.gov
busaserv@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

Articles of Organization for a Domestic Limited Liability Company

Filing Fee: \$99
Form Must Be Typed

2018 JAN 11 AM 11:39

CHECK ONLY ONE (1) BOX

(1) ☒ Articles of Organization for Domestic
For-Profit Limited Liability Company
(115-LCA)

(2) ☐ Articles of Organization for Domestic
Nonprofit Limited Liability Company
(116-LCA)

 Name of Limited Liability Company **NIEDERMAN FAMILY FARM, LLC**

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

 Effective Date
 (Optional)

 mm/dd/yyyy

 (The legal existence of the limited liability company begins upon the filing
of the articles or on a later date specified that is not more than ninety days
after filing)

 This limited liability company shall exist for
 (Optional)

 Period of Existence

 Purpose
 (Optional)

****Note for Nonprofit LLCs**

The Secretary of State does not grant tax exempt status. Filing with our office is not sufficient to obtain state or federal tax exemptions. Contact the Ohio Department of Taxation and the Internal Revenue Service to ensure that the nonprofit limited liability company secures the proper state and federal tax exemptions. These agencies may require that a purpose clause be provided.

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004/005

ORIGINAL APPOINTMENT OF AGENT

The undersigned authorized member(s), manager(s) or representative(s) of

NIEDERMAN FAMILY FARM, LLC

Name of Limited Liability Company

hereby appoint the following to be Statutory Agent upon whom any process, notice or demand required or permitted by statute to be served upon the limited liability company may be served. The name and address of the agent is

BETHANN NIEDERMAN

Name of Agent

5110 LESOURDSVILLE-WEST CHESTER ROAD

Mailing Address

HAMILTON

City

Ohio

State

45011

ZIP Code

ACCEPTANCE OF APPOINTMENT

The undersigned, BETHANN NIEDERMAN named herein as the statutory agent
Statutory Agent Name

for NIEDERMAN FAMILY FARM, LLC
Name of Limited Liability Company

hereby acknowledges and accepts the appointment of agent for said limited liability company

Statutory Agent Signature



Individual Agent's Signature / Signature on Behalf of Business Serving as Agent

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005/005

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

Articles and original appointment of agent must be signed by a member, manager or other representative.

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

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.

Bethann Niederman

Signature

By (if applicable)

BETHANN NIEDERMAN

Print Name

Signature

By (if applicable)

Print Name

Signature

By (if applicable)

Print Name