DOC ID ----> 201806700864

DATE	DOCUMENT ID	DESCRIPTION	FILING	EXPED	CERT	COPY
03/15/2018	201806700864	FICTITIOUS NAME REGISTRATION (NFO)	39.00	0.00	0.00	0.00

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STATE OF OHIO
CERTIFICATE

Ohio Secretary of State, Jon Husted
4147605

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

RUSSO LAWN CARE

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

Document(s)	Document No(s):
FICTITIOUS NAME REGISTRATION	**201806700864**

Effective Date: 03/08/2018

DOMINIC JAMES RUSSO
3698 SANDAL LANE
CINCINNATI, OH 45248

Expiration Date: 03/08/2023

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 15th day of March, A.D. 2018.

Jon Husted

Ohio Secretary of State

DOC ID ----> 201806700864

Form 534A Prescribed by:

JON HUSTED
Ohio Secretary of State

Date Electronically Filed: 3/8/2018

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*

For screen readers, follow instructions located at this path.

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)

RUSSO LAWN CARE
Name being Registered or Reported

DOMINIC JAMES RUSSO
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):

All registrants must complete the information in this section

The general nature of business conducted by the registrant:

Mowing grass

Business address:

3698 SANDAL LANE
Mailing Address

CINCINNATI
City

OH
State

45248
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.

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

DOMINIC JAMES RUSSO
Signature

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.