DOC ID ----> 201824301676

DATE	DOCUMENT ID	DESCRIPTION	FILING	EXPED	CERT	COPY
09/04/2018	201824301676	FICTITIOUS NAME REGISTRATION (NFO)	39.00	0.00	0.00	0.00

Receipt

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

CHECK IT OUT! , LLC
5552 FRANCIS ST.
MENTOR, OH 44060

STATE OF OHIO
CERTIFICATE

Ohio Secretary of State, Jon Husted

4226962

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

LABOR LOFT

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

Document(s)	Document No(s):
FICTITIOUS NAME REGISTRATION	**201824301676**

Effective Date: 08/31/2018

CHECK IT OUT!, LLC
5552, FRANCIS ST.
MENTOR, OH 44060

Expiration Date: 08/31/2023

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 4th day of September, A.D. 2018.

Jon Husted

Ohio Secretary of State

DOC ID ----> 201824301676

Form 534A Prescribed by:

JON HUSTED
Ohio Secretary of State

Date Electronically Filed: 8/31/2018

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)

LABOR LOFT
Name being Registered or Reported

CHECK IT OUT!, 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): 4120224

All registrants must complete the information in this section

The general nature of business conducted by the registrant:

Labor Staffing

Business address:

5552, FRANCIS ST.
Mailing Address

MENTOR
City

OH
State

44060
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.

CHECK IT OUT! , LLC
Signature

CODY GOODMAN
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.