DOC ID ----> 202031801444

DATE	DOCUMENT ID	DESCRIPTION	FILING	EXPED	CERT	COPY
11/13/2020	202031801444	FOREIGN LLC - REGISTRATION CORRECTION (LFC)	50.00	0.00	0.00	0.00

Receipt

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

PARASEC
ATTN: JESSA JIMENEZ-ESTRADA
2804 GATEWAY OAKS DRIVE #100
SACRAMENTO, OH 95833

STATE OF OHIO
CERTIFICATE

Ohio Secretary of State, Frank LaRose

4087802

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

JONES ESTATES LLC

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

Document(s)	Document No(s):
FOREIGN LLC - REGISTRATION CORRECTION	**202031801444**

Effective Date: 11/13/2020

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 13th day of November, A.D. 2020.

Ohio Secretary of State

DOC ID ----> 202031801444

Form 543B Prescribed by:

Frank LaRose
Ohio Secretary of State

Toll Free: 877.767.3453 | Central Ohio: 614.466.3910
OhioSoS.gov | business@OhioSoS.gov
File online or for more information: OhioBusinessCentral.gov

RECEIVED
NOV 13 2020
SECRETARY OF STATE

Foreign Limited Liability Company
Certificate of Correction
Filing Fee: $50
(135-LFC)
Form Must Be Typed

RECEIVED
SEP 23 2020
SECRETARY OF STATE

The undersigned authorized representative of:

JONES ESTATES LLC
Name of limited liability company in jurisdiction of formation

Name of limited liability company in Ohio, if different than above

4087802
Ohio Registration Number

NV
Jurisdiction of Formation

Only complete sections that apply. (sections to be corrected)

Name of limited liability company in jurisdiction of formation

Name of limited liability company in Ohio

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

Jurisdiction of Formation

The address to which interested persons may direct requests for copies of any operating agreement, or any bylaws, or other charter documents of the company is:

Mailing Address

City | State | ZIP Code

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Complete the information in this section if the limited liability company wants to correct the statutory agent information.

The limited liability company hereby appoints the following as its agent upon whom process against the limited liability company may be served in the state of Ohio. The name and complete address of the agent is

PARACORP INCORPORATED
Name of Statutory Agent

4568 MAYFIELD ROAD #204
Mailing Address

CLEVELAND | OH | 44121
City | State | ZIP Code

The limited liability company irrevocably consents to service of process on the agent listed above as long as the authority of the agent continues, and to service of process upon the Ohio Secretary of State if:

a. an agent is not appointed, or
b. an agent is appointed but the authority of that agent has been revoked, or
c. the agent cannot be found or served after the exercise of reasonable diligence.

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

Must be signed by 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.

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.

Andy Witte
Signature

By (if applicable)

Andy Witte
Print Name

Signature

By (if applicable)

Print Name