DOC ID ----> 202426705156

DATE	DOCUMENT ID	DESCRIPTION	FILING	EXPED	CERT	COPY
09/24/2024	202426705156	FICTITIOUS NAME REGISTRATION (NFO)	39.00	0.00	0.00	0.00

Receipt

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

MAURER, NEWLOVE & BAKIES, LLC
ATTN: GREGORY E BAKIES
224 E WOOSTER ST.
BOWLING GREEN, OH 43402

STATE OF OHIO
CERTIFICATE

Ohio Secretary of State, Frank LaRose
5290695

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

AXIS AUTOMATION GROUP

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

Document(s)
FICTITIOUS NAME REGISTRATION

Document No(s):
202426705156

Effective Date: 09/23/2024

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 24th day of September, A.D. 2024.

Ohio Secretary of State

DOC ID ----> 202426705156

Form 534A 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

For screen readers, follow instructions located at this path.

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

RECEIVED
SEP 23 2024
SECRETARY OF STATE

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)

Axis Automation Group
Name being Registered or Reported

Axis Engineering Group, 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): 1023426

All registrants must complete the information in this section

The general nature of business conducted by the registrant:

Machine manufacturer

Business address:

708 W. Boundary Street
Mailing Address

Perrysburg
City

Ohio
State

43551
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.

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.

Gregory E. Bakies, attorney for registrant
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.