



DATE	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
08/09/2016	201622200448	DOMESTIC FOR PROFIT LLC - ARTICLES OF ORG (LCP)	99.00	100.00	0.00	0.00	0.00

### Receipt

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

UNISEARCH INC.  
3958-D BROWN PARK DR  
HILLIARD, OH 43026

## STATE OF OHIO CERTIFICATE

Ohio Secretary of State, Jon Husted  
3928063

It is hereby certified that the Secretary of State of Ohio has custody of the business records for  
**BAJCO MICHIANA IV, LLC**

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

Document(s)

**DOMESTIC FOR PROFIT LLC - ARTICLES OF ORG**

Effective Date: 08/08/2016

Document No(s):

**201622200448**



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  
9th day of August, A.D. 2016.

*Jon Husted*

Ohio Secretary of State



Form 533A Prescribed by:

**JON HUSTED**  
OHIO SECRETARY OF STATE

Toll Free: (877) SCS-FILE (877-767-3453)  
Central Ohio: (614) 466-3810

www.OhioSecretaryofState.gov  
busessrv@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 1982  
Columbus, OH 43216

## Articles of Organization for a Domestic Limited Liability Company

**Filing Fee: \$99**  
**Form Must Be Typed**

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  
(115-LCA)

Name of Limited Liability Company

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)

RECEIVED  
OHIO SECRETARY OF STATE  
CLIENT SERVICE DIVISION  
2016 AUG -8 PM 4:11

**\*\*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.

### ORIGINAL APPOINTMENT OF AGENT

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

Bajco Michiana IV, 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

Faisal Bajwa

Name of Agent

3695 B Boardman-Canfield Rd., Ste. 200

Mailing Address

Canfield

City

OHIO

State

44406

ZIP Code

### ACCEPTANCE OF APPOINTMENT

The undersigned, Faisal Bajwa named herein as the statutory agent

Statutory Agent Name

for Bajco Michiana IV, 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

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.

[Signature box containing handwritten initials "I.S.B."]

Signature

[Empty signature box]

By (if applicable)

Faisal Bajwa

Print Name

[Empty signature box]

Signature

[Empty signature box]

By (if applicable)

[Empty signature box]

Print Name

[Empty signature box]

Signature

[Empty signature box]

By (if applicable)

[Empty signature box]

Print Name