

11/16/2018

DOCUMENT ID 201831902674

DESCRIPTION
DOMESTIC FOR PROFIT LLC - ARTICLES OF
ORG (LCP)

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#### Receipt

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EUSHA SALEEM BAJWA 301 HILLTOP BLVD CANFIELD, OH 44406

### STATE OF OHIO CERTIFICATE

## Ohio Secretary of State, Jon Husted 4255949

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

SCION MANAGEMENT GROUP, LLC

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

Document(s)

Document No(s):

DOMESTIC FOR PROFIT LLC - ARTICLES OF ORG Effective Date: 11/16/2018 201831902674

TO STATE OF STATE OF

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 16th day of November, A.D. 2018.

Jon Hustel
Ohio Secretary of State

Form 533A Prescribed by:



Articles of Organization for Domestic

For-Profit Limited Liability Company

Date Electronically Filed: 11/15/2018

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

Articles of Organization for Domestic

Nonprofit Limited Liability Company

For screen readers, follow instructions located at this path

# Articles of Organization for a Domestic Limited Liability Company

Filing Fee: \$99
Form Must Be Typed

### **CHECK ONLY ONE (1) BOX**

be provided. \*\*

(1)

Name of Lin	ited Liability Company   SCION MANAGEMENT GROUP, LLC  (Name must include one of the following words or abbreviations:  "limited liability company," "limited," "LLC," "L.L.C.," "Itd., "or "Itd".)
Optional:	Effective Date (MM/DD/YYYY) 11/16/2018 (The legal existence of the corporation begins upon the filing of the articles or on a later date specified that is no more than ninety days after filing.)
Optional:	This limited liability company shall exist for Period of Existence
Optional:	Purpose
	TO OWN AND MANAGE RESIDENTIAL AND/OR COMMERCIAL REAL ESTATE FOR LEASING AND RENTING

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	Original Appointment of	f Statutory Agent	
	Original Appointment of	Statutory Agent	
The undersigned au	uthorized member(s), manager(s) or representat	ive(s) of	
SCION MANAGE	EMENT GROUP, LLC		
	(Name of Limited Liabi	lity Company)	
	e following to be Statutory Agent upon whom an ed upon the corporation may be served. The cor		uired or permitted by
EUSHA SAL	EEM BAJWA		
(Name of Statut	cory Agent)		O,
301 HILLTO	P BLVD		)
(Mailing Address	s)	.60.	
CANFIELD		ОН	44406
(Mailing City)		(Mailing State)	(Mailing ZIP Code)
	Acceptance of Ap	pointment	
The Undersigned,	EUSHA SALEEM BAJWA		, named herein as the
	(Name of Statutory Agent)		
Statutory agent for	SCION MANAGEMENT GROUP, LLC		
	(Name of Limited Liability Company)		
hereby acknowledge	es and accepts the appointment of statutory age	ent for said limited liability compar	ıy.
Statutory Agent Sign	nature [		
	EUSHA SALEEM BAJWA		

(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 EUSHA SALEEM BAJWA Signature Articles and original appointment of agent must be signed by a member, manager or other representative. By (if applicable) If the authorized representative is an individual, then they must sign in the "signature" box and print his/her name Print Name in the "Print Name" box. If the authorized representative is a business entity, not an individual, then please print the entity name in the Signature "signature" box, an authorized representative of the business entity must sign in the "By" box By (if applicable) and print his/her name and title/authority in the "Print Name" box. **Print Name** Signature By (if applicable)

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**Print Name**