

DATE:	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
03/16/2011	201107401488	ARTICLES OF ORGNZTN/DOM. PROFIT LIM.LIAB. CO. (LCP)	125.00	.00		.00	.00

**Receipt**

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

DZIENNY LAW OFFICE, LTD.  
500 MADISON AVE.  
STE. 200  
TOLEDO, OH 43604

# STATE OF OHIO

## CERTIFICATE

**Ohio Secretary of State, Jon Husted**

**2004593**

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

**TALON RENOVATIONS, LLC**

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

Document(s)

**ARTICLES OF ORGNZTN/DOM. PROFIT LIM.LIAB. CO.**

Document No(s):

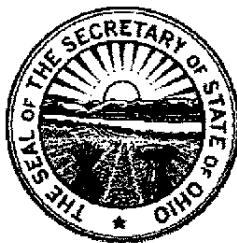
**201107401488**



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 10th day of March, A.D.  
2011.

Ohio Secretary of State



**Form 533A Prescribed by the:  
Ohio Secretary of State**

Central Ohio: (614) 466-3910  
Toll Free: (877) SOS-FILE (767-3453)  
[www.sos.state.oh.us](http://www.sos.state.oh.us)  
Busserv@sos.state.oh.us

**Expedite this form: (select one)**  
Mail form to one of the following:

- |   |                                   |
|---|-----------------------------------|
| <input type="radio"/> Expedite                            | PO Box 1390<br>Columbus, OH 43216 |
| <b><u>*** Requires an additional fee of \$100 ***</u></b> |                                   |
| <input checked="" type="radio"/> Non Expedite             | PO Box 670<br>Columbus, OH 43216  |

**ARTICLES OF ORGANIZATION FOR A DOMESTIC  
LIMITED LIABILITY COMPANY**  
**Filing Fee: \$125.00**

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

<p>(1) <input checked="" type="checkbox"/> Articles of Organization for Domestic For-Profit Limited Liability Company (115-LCA) ORC 1705</p>	<p>(2) <input type="checkbox"/> Articles of Organization for Domestic Nonprofit Limited Liability Company (115-LCA) ORC 1705</p>
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Name of limited liability company

Talon Renovations, LLC

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)

Perpetual Existence

Period of Existence

Purpose

(Optional)


Check here if additional provisions are attached

## ORIGINAL APPOINTMENT OF AGENT

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

Talon Renovations, 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

Michael A. Dzienny, Esq.

Name of Agent

500 Madison Ave., Suite 200

Mailing Address

Toledo

City

Ohio

State

43604

Zip Code

- If the agent is an individual and using a P.O. Box, check this box to certify the agent is an Ohio resident.

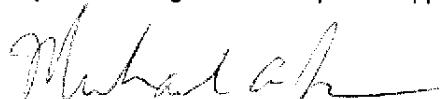
## ACCEPTANCE OF APPOINTMENT

The undersigned, named herein as the statutory agent for

Talon Renovations, LLC

Name of Limited Liability Company

hereby acknowledges and accepts the appointment of agent for said limited liability company



Agent's Signature

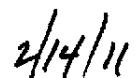
By signing and submitting this form to the Ohio Secretary of State, the undersigned hereby certifies that he or she has the requisite authority to execute this document on behalf of the limited liability company identified above.

**REQUIRED**

Articles and original appointment of agent must be authenticated (**signed**) by a member, manager or other representative.



Signature



Date

Perry Teplitsky

Print Name

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Signature

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Date

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Print Name

---

Signature

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Date

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Print Name

(See Instructions Below)