

DATE 06/27/2014 DOCUMENT ID 201417800006

DESCRIPTION REG. OF FOR. PROFIT LIM. LIAB. CO. (LFP)

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DIAMOND ACCESS ATTN: LISA VAIDO 887 SOUTH HIGH STREET COLUMBUS, OH 43206

STATE OF OHIO CERTIFICATE

Ohio Secretary of State, Jon Husted 2306004

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

HANSEN BANNER, LLC

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

Document(s)

Document No(s):

201417800006

REG. OF FOR. PROFIT LIM. LIAB. CO.

Effective Date: 06/26/2014



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 27th day of June, A.D. 2014.

Jon Hostel
Ohio Secretary of State



Form 533B Prescribed by:
Ohio Secretary of State
JON HUSTED
Ohio Secretary of State

Central Ohio: (614) 466-3910
Toll Free: (877) SOS-FILE (767-3453)
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Registration of a Foreign Limited Liability Company

Filing Fee: \$125

CHECK ONLY	ONE		BOX
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Liability Company (106-LFA) ORC 1705	eigh Foi-Floin Emined	(2) L	Limited Liabil (106-LFA) ORC 1705	ity Company	
Jurisdiction of Formation	Delaware	Juri	sdiction of Form	nation	
Date of Formation	05/07/2014	Date	e of Formation		
Name of Limited Liability Co	mpany in its jurisdiction of for	metion			
Name under which the foreign jurisdiction of formation) is:	gn limited liability company de	sires to transact b	usiness in Oĥio	(If different from its name	in its
The address to which interes	sted persons may direct reque charter documents of the con	ests for copies of t		11. 10. 10. 10. 10. 10. 10. 10. 10. 10.	26 PH
The Corporation Trust Co	mpany				11:20
Name		The state of the s	***************************************	3 !	
1209 Orange Street					
Mailing Address					
Wilmington			DE	19801	
City			State	ZIP Code	

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Last Revised: 11/29/12

CSC-Lawyers Incorporating Ser	vice (Corporation Service Company)	
Name		
50 West Broad Street, Suite 180	0	
Mailing Address		- The state of the
Columbus	Ohio 43215	
City	State ZIP Code	ė
resident. he limited liability company irrevocue authority of the agent continues	all and using a P.O. Box, check this box to confirm that the agent ably consents to service of process on the agent listed above as long, and to service of process upon the Ohio Secretary of State if: not appointed, or	
b. an agent is	appointed but the authority of that agent has been revoked, or annot be found or served after the exercise of reasonable diligence.	
y signing and submitting this form as the requisite authority to execute equired ust be signed by an athorized representative. authorized representative an individual, then they ust sign in the "signature" by and print their name the "Print Name" box. authorized representative a business entity, not an dividual, then please print e business name in the ignature" box, an ithorized representative the business entity ust sign in the "By" box d print their name in the rint Name" box.	to the Ohio Secretary of State-the undersigned hereby certifies that he this document Signature By (if applicable) Zach Vela Print Name By (if applicable) Print Name	e or she
	Signature	
	By (if applicable)	
	Print Name	

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Last Revised: 11/29/12