

DATE 05/25/2022 DOCUMENT ID 202214501274

DESCRIPTION FOREIGN LLC - CERTIFICATE OF REGISTRATION (LFP) FILING 99.00 EXPED

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Receipt

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

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

FOREIGN LLC - CERTIFICATE OF REGISTRATION

STATE OF OHIO CERTIFICATE

Ohio Secretary of State, Frank LaRose
4873807

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

EVERGREEN POPLAR, LLC

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

Document(s)

Document No(s):

Effective Date: 05/24/2022

202214501274



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 25th day of May, A.D. 2022.

Ohio Secretary of State

DocuSign Envelope ID: C58ACEA8-8E1E-4320-BFBF-774426EB9E29 Form 617 Prescribed by:



Toll Free: 877.767.3453 Central Ohio: 614.466.3910

OhioSoS.gov

business@OhioSoS.gov

File online or for more information: OhioBusinessCentral.gov

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

For screen readers, follow instructions located at this path

Registration of a Foreign Limited Liability Compan

For a Foreign (Non-Ohio) Limited Liability Company Filing Fee: \$99 Form Must Be Typed 106-LFA

			Evergreen Po	plar, LLC			
Assumed Na	ıme, if the na	me above does no	t comply with section	n 1706.07 of the Revise	ed Code		
(Na	me must include	one of the following wo	ords or abbreviations: "lim	nited liability company", "limit	 led", "LLC", "L.L.	C.", "Itd.", or "Itd".)	
Jurisdiction (of formation	DEI	LAWARE				
Γhe foreign li	mited liability	company is a forei	ign limited liability co	mpany.			
Optional:	Effective	Date (MM/DD/YYYY)		Effe	ective Time		
Secretary of Stays following	State for filing g the date of i	under this chapter	r may specify an effe	on of a foreign limited l active time and a delay gistration of a foreign li	ed effective of	late of not more	e than nine
f applicable			in section 1706.511(nore series of asset	(C) if the foreign limit	ted liability c	ompany estab	lishes or

	Original Appointment of Statutory A	gent	
he undersigned au	uthorized member(s), manager(s) or representative(s) of		
	Evergreen Poplar, LLC		
	(Name of Limited Liability Company)		
	e following to be Statutory Agent upon whom any process, notic ed upon the corporation may be served. The complete address o		ired or permitted by
	COGENCY GLOBAL INC.		
(Name of Statut	ory Agent)		
	3958-D Brown Park Dr.		
(Mailing Addres	s)		
	Hilliard	Ohio	43026
(Mailing City)		(Mailing State)	
	Acceptance of Appointment		
ne Undersigned,	Acceptance of Appointment COGENCY GLOBAL INC.		, named herein as the
ne Undersigned,			, named herein as the
he Undersigned, tatutory agent for	COGENCY GLOBAL INC.		, named herein as the
	COGENCY GLOBAL INC. (Name of Statutory Agent)		, named herein as the
tatutory agent for	COGENCY GLOBAL INC. (Name of Statutory Agent) Evergreen Poplar, LLC		
tatutory agent for	COGENCY GLOBAL INC. (Name of Statutory Agent) Evergreen Poplar, LLC (Name of Limited Liability Company) es and accepts the appointment of statutory agent for said limite		

Form 617

Last Revised: 01/2022

By signing and submitting this form has the requisite authority to execu	n to the Ohio Secretary of State, the undersigned hereby certifies that he or she ite this document.
	CocuSigned by:
Required	David Prinzivalli
This filing must be signed by at least one person authorized by the limited liability company.	Sigharule 510436
If the person is an individual, then he or she must sign on the "signature" line and print his or	By (if applicable)
her name in the "Print Name"	David Prinzivalli
Box.	Print Name
If the person is a business entity, please print the name of the entity in the "Signature" box and an authorized representative of	
the business must sign in the "By" box and print his or her name and title or authority in the "Print Name Box."	Signature
	By (if applicable)
	Print Name
	Signature
	By (if applicable)
	Print Name