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(Requestor's Name)		
(Address)		
(Address)		
(Cit	y/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		

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2008 FEB -4 PM 4: 29
SECRETARY OF STATE

2008 FEB -4 PM 4:

COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: CSS Alliana	e Inc.
(Name of corpo	oration - must include suffix)
Dear Sir or Madam:	
	n for Authorization to Transact Business in Florida," d to register the above referenced foreign corporation to
Please return all correspondence concerning this n	natter to the following:
Leiah M.	Jennings
(Nar	Jennings me of Person)
CSS Allia	ince, Inc.
(Fire	n/Company)
<u>8066 E.</u>	Fulton St. Address)
	Address)
Ada, MI	49301
(City/S	tate and Zip code)
For further information concerning this matter, ple Legh Jennings at (Legh Jenning) at (Legh Jenning) at (Legh Jenning)	
(Maine of Ferson)	trea Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount:	
\$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & \$87.50 Filing Fee, Certified Copy Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES. THE FOLLOWING IS SUBMITTED TO

REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA. ance (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp." "Inc," "Co," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) 06-1829938 (State or country under the law of which it is incorporated) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) (Purpose(s) of corporation authorized in home state or country to be carried (At in state of Florida) 9. Name and street address of Florida registered agent; (P.O. Box NOT acceptable) Name: ypress Creek Rd., Ste. Office Address: 10. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

(Registered agent's signature)

12. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Christopher Frain Address: 8066 E. Fulton St. Ada, MI 49301 Vice Chairman: Address: Director: C. Andrew Shaffer Address: 8066 E. Fulton St. Ada, MI 49301 Director: _ **B. OFFICERS** President: Christopher train Hon St., Ada, MI 49301 Treasurer: Christopher Frain Fulton St. Ada, MI 49301 NOTE: If necessary, you may attack an addendum to the application listing additional officers and/or directors. (Signature of Director of Officer listed in number 12 of the application) Christopher Frain President
(Typed or printed name and capacity of person signing application)

From: unknown Page: 2/3 Date: 1/29/2008 2:43:16 PM

Michigan Department of Labor and Economic Growth Bureau of Commercial Services, Corporation Division

`P.Ö. Box 30054

Lansing, Michigan 48909

Telephone: (517) 241-6470

INVOICE

Invoice: 945245

Date: 01/29/2008

**** FAX ****

LEE JENNINGS CSS ALLIANCE 8066 E FULTON ST

ADA

MI 49301

Phone:

616 248 3372

ID DESCRIPTION

QTY PG/CH

01240V CSS ALLIANCE, INC.

Good standing certificate

10

Sub-Total: \$10.00

Order Total:

\$10.00

Expedited Service Charge:

\$.00

REMIT THIS AMOUNT:

\$10.00

If your order is incorrect, contact this agency immediately at the above address, or call (517)241-6470 or fax your concerns to (517)241-0538.

MCL 450.1131, MCL 450.4104(5), and MCL 449.48 provide: A photostatic, micrographic,

photographic, optical disc media, or other reproduced copy certified by the administrator,*

* which may be sent by facsimile transmission, shall be considered an original for all
 * purposes and is admissible in evidence in like manner as an original.

* * * * * *



Lansing, Michigan

This is to Certify That

CSS ALLIANCE, INC.

a Michigan profit corporation was validly incorporated on November 15, 2007, and said corporation is validly in existence under the laws of this state....

This certificate is issued pursuant to the provisions of 1972-PA 284, as amended, to attest to the fact-that the corporation is in good standing in Michigan as of this date and is duly authorized to transact business and for no other purpose.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.



Sent by Facsimile Transmission 945245

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 29th day of January, 2008.

Direct

Bureau of Commercial Services