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(1)		
(Re	equestor's Name)	
(Ac	ddress)	
(Ad	ddress)	
(C	ity/State/Zip/Phon	e #)
		_
PICK-UP	WAIT	MAIL
(Be	usiness Entity Nar	ne)
(De	ocument Number)	
Certified Copies	Certificates	s of Status
-	_	
Special Instructions to	Filing Officer:	
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SECRETARY OF STALE BIVISION OF CORPORATIONS

Office Use Only

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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.

1. KOKOMO MH	IP INC			
	corporation; must include "INCORPORATE Corp," "Inc," "Co," or "Corp.")	₹D,	" "COMPANY," "CORPORATION,"	
(If name unavai	able in Florida, enter alternate corporate na	me	adopted for the purpose of transacting business i	n Florida)
Michigan		3.	•	
(State or country	under the law of which it is incorporated)		. (FEI number, if applicable)	
2-3-1992		5.	Perpetual	
(Date	e of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")		
Has not condu	cted business in Florida prior to registra	ıtio	n.	
• • • • • • • • • • • • • • • • • • • •			n Florida, if prior to registration)	
	(SEE SECTIONS 607.1501 & 607	7.15	502, F.S., to determine penalty liability)	
•				
*	(Principal office a	ıdd:	ress)	
16201 W 14 M	` •		•	
10291 W 14 M	ILE RD STE 3 BEVERLY HILLS MI 4			
	(Current mailing a	wai	ress)	
Ourse of sure				
Owner of proper	orty s) of corporation authorized in home state or		untry to be comised out in state of Florida	
(r urpose(s	of corporation authorized in home state of	· CO	unity to be carried out in state of Florida)	
. Name and stree	et address of Florida registered agent: (I	2.0	Box NOT acceptable)	Ę
Nimm	Jay L. Swistak			JUN 22
Name:	Day L. Owistak	—		
Office Address:	777 East Atlantic Ave, Ste: C2 #371			PH 12:
	Delray Beach			₹
	(City)	—	, Florida 33483	28
	(City)		(Zip code)	

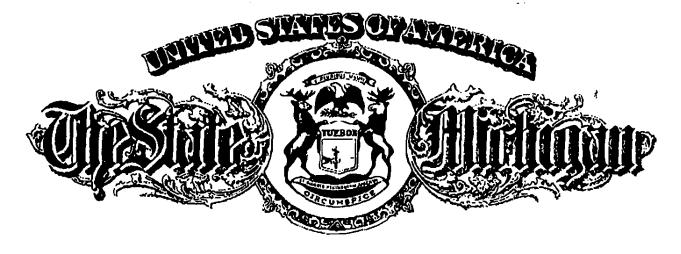
10. Registered agent's acceptance:

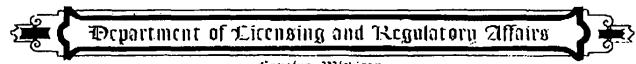
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

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.

12. Nam	nes and business addresses of officers and/or directors.		
A. DIR	ECTORS		
Chairman	i:		
Address:			
Vice Chai	irman:		
Address:		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
			
	MICHAEL G. ANDONIADES	<u>-</u>	
Address:	16291 W 14 MILE RD STE 3 BEVERLY HILLS MI 48025		
Director:			· · · · · · · · · · · · · · · · · · ·
Address:			
B. OFF	ICERS		
President	MICHAEL G. ANDONIADES		***
Address:	16291 W 14 MILE RD STE 3 BEVERLY HILLS MI 48025		78 8038 8038
		<u>~</u>	- <u>공공</u> 교 - 공원
Vice Pres	ident:	- 32	100 100 100 100 100 100 100 100 100 100
Address:		12:	္ကမ္
		28	2 5
Secretary	MICHAEL G. ANDONIADES		
Address:	16291 W 14 MILE RD STE 3 BEVERLY HILLS MI 48025		
Treasurer	·		··
Address:			
NOTE:	If necessary, you may attach an addendum to the application listing additional officers and/or d	irectors.	•
13.	(Signature of Director or Officer listed in number 12 of the application)		
14 MIC	CHAEL G. ANDONIADES , Pres.		
	(Typed or printed name and capacity of person signing application)		-





±ansing, Michigan

This is to Codify That

KOKOMO MHP INC.

was validly incorporated on February 3, 1992, as a Michigan profit corporation, 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 altost 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 cortificate 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.

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Sont by Facsimile Transmission 471599

In tostimony whereof, I have hereunto set my hand, in the City of Lunsing, this 22nd day of June, 2011

Director

Bureau of Commercial Services

fr hat fear

SECRETARY OF STATE