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(Re	questor's Name)		
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SECKETARY OF STATE

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COVER LETTER

TO:	New Filing Sect Division of Corp					
SURI	ECT: Conn	ectU Syste	ms, In	C.		
5020					clude suffix	
Dear S	ir or Madam:					
"Certif		," or "Certificate	of Good St	anding" and	l check are sub	ct Business in Florida," mitted to register the
Please	return all correspo	ondence concernir	ng this matt	ter to the fol	lowing:	
Gai	H. Straith					
			Name o	f Person		
Gai	I H. Straith	, PLLC				
	· · · · · ·		Firm/Co	mpany		
280	N. Old Wo	odward A	ve., St	e. 104		
Birn	ningham, N	/II 48009	Add	lress .		
			City/State	and Zip co	de .	
con	nectu@conr	•				
		E-mail address:	(to be used	d for future	annual report	notification)
For fu	rther information of	concerning this ma	atter, please	e call:		
Gai	l H. Straith		.,248	, 220	-1965	
	Name of Person		Аге	a Code & D	-1965 aytime Teleph	one 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			
Enclos	sed is a check for t	he following amo	unt:			
5 \$70	0.00 Filing Fee	□ \$78.75 Filing Certificate o		\$78.75 Certifie	Filing Fee & d Copy	S87.50 Filing Fee, 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.

			_	
(If name unavails Michigan	•	ne adopted for the purpose of transacting business in Florida) 3. 46-1673133	,	
	under the law of which it is incorporated)	(FEI number, if applicable)		
January	•	5. Perpetual		
····	(Date of incorporation) (Duration: Year corp. will cease to exist or "pe		_	
		s in Florida, if prior to registration) 7.1502, F.S., to determine penalty liability)	_	
เลกกก พ	Nine Mile Rd., Ste. 400,	• • •		
10000 VV.	(Principal office a		_	
18000 W.	Nine Mile Rd., Ste. 400, S	•		
	(Current mailing a	·		
		g managed IT and infrastructure selvices	13 FEB	
(Purpose(s	s) of corporation authorized in home state or	r country to be carried out in state of Florida)	2	
Name and stree	et address of Florida registered agent: (P.O. Box NOT acceptable)	2	
Name:	James C. Hemphill		.; -₹	
fice Address:	1138 New York Ave.	A SECOND	ų7	
	St. Cloud	. Florida 34769-3782		
	(City)	(Zip code)		

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.

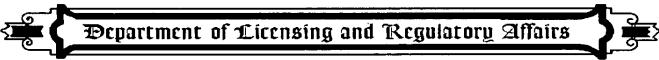
(Registered agent's signature)

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. Names and business addresses of officers and/or directors:			
A. DIRECTORS			
Chairman:			<u></u>
Address:			
	·		
Vice Chairman:			
Address:	<u> </u>		
<u> </u>			
Director: Gerald R. Wiltse			
18000 W. Nine Mile Rd., Ste. 400			
Southfield, MI 48075	,		
Director:			
Address:		•	
B. OFFICERS	. •		i de la companya de l
President: Gerald R. Wiltse	ి క్రౌం	<u>h</u>	
Address: 18000 W. Nine Mile Rd., Ste. 400		<u> </u>	***
Southfield, MI 48075	ASS	<u> </u>	tian out the generation
	B Enc	Md	
Vice President:	FLOR FLOR	نان عد	Name of the last
Address:	Dm Dm	1 7	
Gorold P. Wilton			
Secretary: Gerald R. Wiltse	 		
Address: Same as Above			
Treasurer: Gerald R. Wiltse			
Address: Same as Above			
NOTE: If necessary, you may attach an addendum to the application listing additional of	officers and/or d	irector	rs.
13. Cerus & the			
Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) aff are true and that he or she is aware that false information submitted in a document to the a third degree felony as provided for in s.817.155, F.S. Gerald R. Wiltse, President	irms that the fac Department of	ts state State o	ed herein constitutes

(Typed or printed name and capacity of person signing application)





Lansing, Michigan

This is to Certify That

CONNECTU SYSTEMS, INC.

was validly incorporated on January 7, 2013, 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 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.

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In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 5th day of February, 2013.

Bureau of Commercial Services