

# Florida Department of State

**Division of Corporations** Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850) 222-1092

Fax Number : (850)878-5368

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Rmail Address:

## FOREIGN PROFIT/NONPROFIT CORPORATION Trion Solutions I, Inc.

| Certificate of Status | 0       |
|-----------------------|---------|
| Certified Copy        | 0       |
| Page Count            | 05      |
| Estimated Charge      | \$70.00 |

Electronic Filing Menu

Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

6/14/2013

### **COVER LETTER**

| TO: New Filing Section Division of Corporations  |  |
|--|--|
| SUBJECT: Trion Solutions I, Inc.   |  |
| Name of corporation - must include suffix  |  |
| Dear Sir or Madam:   |  |
| The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida. |  |
| Please return all correspondence concerning this matter to the following:  |  |
| James E. Baiers  |  |
| Name of Person   |  |
| Clark Hill PLC   |  |
| Firm/Company   |  |
| 500 Woodward Ave., Suite 3500  |  |
| Address  |  |
| Detroit, MI 48226-3435   |  |
| City/State and Zip code  |  |
| jbaiers@clarkhill.com  |  |
| E-mail address: (to be used for future annual report notification)   |  |
| For further information concerning this matter, please call:   |  |
| James E. Baiers at 313 965-3430  Name of Person Area Code & Daytime Telephone Number   |  |
| Name of Person Area Code & Daytime Telephone Number  |  |
|  |  |
| STREET/COURIER ADDRESS: MAILING ADDRESS: New Filing Section New Filing Section   |  |
| Division of Corporations Division of Corporations  |  |
| Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314  |  |
| Tallahassee, FL 32301  |  |
| Enclosed is a check for the following amount:  |  |
| ■ \$70.00 Filing Fee □ \$78.75 Filing Fee & □ \$78.75 Filing Fee & □ \$87.50 Filing Fee, Certificate of Status Certified Copy Certified Copy   |  |

#### APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

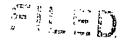
IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

| -                                     | ole in Florida, enter alternate corporate nam   |  |
|---------------------------------------|---|--|
| Michigan                              | 3   | , 46-1553371   |
|                                       | nder the law of which it is incorporated)   | (FEI number, if applicable)  |
| 12/11/201                             | <u> </u>  | , Perpetual  |
| • •                                   | of incorporation)   | (Duration: Year corp. will cease to exist or apartetual  |
| None                                  |   | 20   |
|                                       |   | in Florida, if prior to registration) 1502, P.S., to determine penalty liability)  |
| 340 F. Bid                            | Beaver, Suite 160, Troy   | The state of the s |
| <u> </u>                              | (Principal office at  |  |
| 340 E. Big                            | Beaver, Suite 160, Troy,  |  |
|                                       |   |  |
|                                       | (Current mailing at   | idress)  |
|                                       | · · · · ·   |  |
| Engage i                              | n any activity for which co   | orporations may be formed.   |
| Engage ii                             | n any activity for which co   | orporations may be formed.   |
| Engage ii                             | n any activity for which construction authorized in home state or traddress of Florida registered agent: (F | country to be carried out in state of Plorida)  2.O. Box NOT acceptable)   |
| Engage in                             | n any activity for which co   | country to be carried out in state of Plorida)  2.O. Box NOT acceptable)   |
| Engage in (Purpose(s) Name and street | n any activity for which construction authorized in home state or traddress of Florida registered agent: (F | country to be carried out in state of Plorida)  2.O. Box NOT acceptable)   |
| Engage in (Purpose(s)                 | any activity for which constructed in home state or traddress of Florida registered agent: (F               | country to be carried out in state of Plorida)  2.O. Box NOT acceptable)   |

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) Danijela Byers, Asst. Secretary, CT Corporation

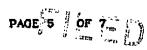
<sup>11.</sup> Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

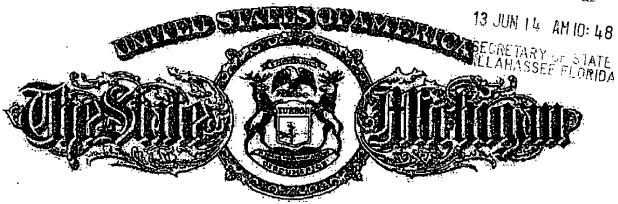


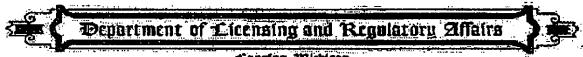
13 JUN 14 AM 10: 48

| 12. Names and business addresses of officers and/or directors:   | SECRETARY OF STATE TALLAHASSEE FLORIDA             |  |
|--|--|--|
| A. DIRECTORS   | TALL AHASSEE FLORIDA                               |  |
| Chairman: Bonner C. Upshaw III   |  |  |
| Address: 340 E. Big Beaver, Suite 160, Troy, MI 48083  |  |  |
|  |  |  |
| Vice Chairman:   | · · · · · · · · · · · · · · · · · · ·              |  |
| Address:   | ······································             |  |
|  |  |  |
| Director:  |  |  |
| Address:   |  |  |
| · <del></del>  |  |  |
| Director:  |  |  |
| Address:   |  |  |
|  |  |  |
| B. OFFICERS  President: Bonner C. Upshaw III   |  |  |
| Address: 340 E. Big Beaver, Suite 160, Troy, MI 4  | 8083   |  |
| Address:   |  |  |
| Vice President   |  |  |
| Vice President: Address:   |  |  |
|  |  |  |
| Dannas C. Unaharis III   |  |  |
| Address: 340 E. Big Beaver, Suite 160, Troy, MI 4  | 8083   |  |
| Treasurer: Bonner C. Upshaw III  |  |  |
| Address 340 E. Big Beaver, Suite 160, Troy, MI 4   | 8083   |  |
| NOTE: If necessary you may attach an addendum to the application lis   | sting additional officers and/or directors.        |  |
| 13.  |  |  |
| The officer or director signing this document (and who is listed in numb are true and that he or she is aware that false information submitted in a a third degree felony as provided for in s.817.155; F.S. | per 12 above) affirms that the facts stated herein |  |
| 14. Bonner C. Upshaw III, President  |  |  |

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







Lansing, Michigan

This is to Certify That

#### TRION SOLUTIONS I, INC.

was validly incorporated on December 11, 2012, 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.

Sent by Facsimile Transmission 1141690

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 11th day of June, 2013.

Bureau of Commercial Services