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PICK-UP	■ WAIT	MAIL
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(Do	cument Number)	
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FLORIDA DEPARTMENT OF STATE Division of Corporations

August 29, 2016

DALE H. SMITH III 10192 GRAND RIVER RD, STE 111 BRIGHTON, MI 48116

SUBJECT: CMCS, INC

Ref. Number: W16000059620

We have received your document for CMCS, INC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tanisha L Washington Regulatory Specialist II

Letter Number: 616A00018318

COVER LETTER

TO:	Registration Sec Division of Corp				
CHID.	IECT:	CMCS, I	NC		
56.50	.EC11	Name of c	orporation - n	ust include suffix	
Dear S	Sir or Madam:				
"Certi	ficate of Existence		Good Standir	g" and check are subm	t Business in Florida," nitted to register the
Please	teturn all corresp	ondence concerning	this matter to	the following.	
		Dale H S	mith III		
			Name of Per	son	
		CMCS,	Inc		
		10192 G	Firm/Compa rand River F		
			Address	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, , , , , , , , , , , , , , , , , , ,
		Brighto	n, MI 48116		
-			ity/State and	Zip code	**************************************
	9911994.4	E-mail address: (i	o be used for	future annual report n	otification)
For fu	irther information	concerning this matt	er, please call	:	
Lee	Ann Wall	at	810	229-9385	
	Name of Perso		Area Code	Daytime Toleph	one Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations			MAILING ADDRESS: Registration Section Division of Corporations		
	Clifton Building 2661 Executive Tallahassee, FL	Center Circle		P.O. Box 6327 Tallahassee, Fl	
Enclo	sed is a check for	the following amon	nt:		
¢ X \$₹	0.00 Filing Fee	578.75 Filing I Certificate of		78.75 Filing Fee & Certified Copy	S87.50 Filing Fee, Cortificate of Status & Cortified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

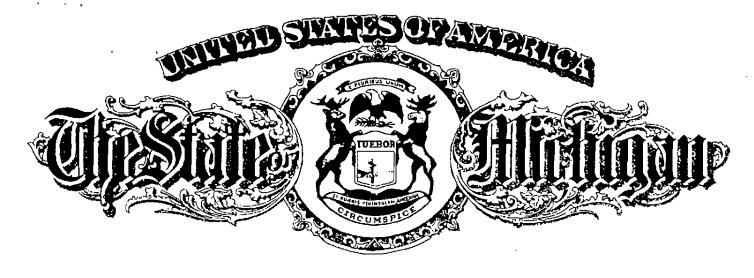
IN COMPLIANCE WITH SECTION 607.1503. FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

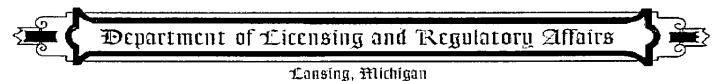
1. CMCS, Inc			
	rporation; must include "INCORPORATED," rp," *Inc," *Co," or *Corp.*)	"COMPANY," "CORPORATION	
CMCS (MI)), Inc		
(If name unavailab	ole in Florida, enter alternate corporate name ac	lopted for the purpose of transacting	business in Florida)
2. Michigan	3	38-3278480	
(State or country	under the law of which it is incorporated)	(FEI number, if app	olicable)
February 6,	1996 5,		
` '	of incorporation)	(Date of duration, if other)	han perpetual)
6.		•	
·	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.150	Florida, if prior to registration) 2, F.S., to determine penalty liabilit	y')
7 10192 Gra	nd River Rd. Ste 111, Brighton, MI 48	116	
	(Principa	l office address)	
			<u> </u>
	(Current mailing	, address, if different)	H H
			30 F
8. Name and street	address of Florida registered agent: (P.O	Box NOT acceptable)	
Name:	Ralph Marcadis	- Andrews day -	PHIZ: 34
Office Address:	5104 South Westshore Blvd		NDA NDA NDA
	Tampa	, Florida 33611	
	(City)	(Zip code)	
designated in this further agree to co	ed as registered agent and to accept service application, I hereby accept the appointment of all statutes remiliar with and accept the obligations of	ent as registered agent and agra dative to the proper and comple	ee to act in this capacity. te performance of my

10. 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.

11. Names and business addresses of officers and/or directors:

A. DIRECTURS		
Chairman:	Dale H. Smith III	
Address:	10192 Grand River Rd. Ste 111	
***************************************	Brighton, MI 48116	
Vice Chairman:	SAME	
Address:		
Director:	SAME	***************************************
Address:		
Director:		F (2)
Address:		e Se
		730 30 1743 ASS
B. OFFICERS		PA PA
President:	Dale H. Smith III	Logical Logical Control Contro
	10192 Grand River Rd. Ste 111	0A 34
	Brighton, MI 48116	
Vice President:	Same	
Secretary:	Same	
Address:		
Treasurer:	Same	
Address:		
NOTE: If necessa	rry, you may attach an addendum to the application listing additional of	Ticers and/or directors.
12	De or Solo	
are true and that he	Signature of Director or Officer ctor signing this document (and who is listed in number 11 above) affire or she is aware that false information submitted in a document to the I my as provided for in s.817.155, F.S.	ms that the facts stated herein Department of State constitutes
13.	Dale H. Smith III - President	t
	(Typed or printed name and capacity of person signing applicatio	a)





This is to Certify That

CMCS, INC.

was validly incorporated on February 6, 1996, 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

16 SEP 30 PH 12: 34

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 19th day of September, 2016.

Julia Dale, Director

Corporations, Securities & Commercial Licensing Bureau