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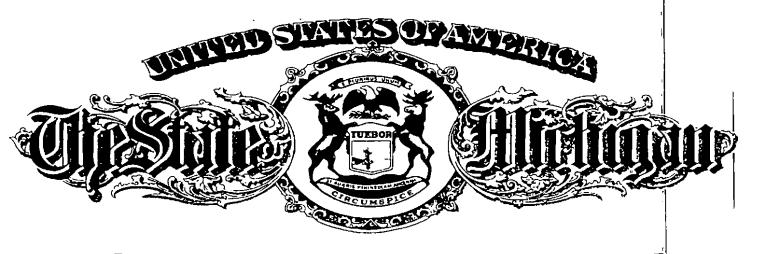
TO: Registration Section Division of Corporations	
SUBJECT: MID-MICHIGAW LEASING, INC.  Name of corporation - must include suffix	· · · · · · · · · · · · · · · · · · ·
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Flo "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register above referenced foreign corporation to transact business in Florida.	'1
Please return all correspondence concerning this matter to the following:	i
LARRY KNOWLES	
Name of Person	
MID-MICHIGAN LEASING, INC Firm/Company	
Firm/Company	
709 BRANTENBURG WAY  Address  LUTZ, FL 33548  City/State and Zip code	;
Address	
LUTZ FL 33548	
City/State and Zip code	2.
E-mail address: (to be used for future annual report notification)	<u> </u>
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	1
LARRY WOWLES at (\$\int 13\) 948-7625  Name of Person Area Code Daytime Telephone Number	_ 1
Name of reison Area Code Daytime Telephone Number	,
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301  MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Enclosed is a check for the following amount:	1
\$70.00 Filing Fee	of Status &

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

REGISTER A FORE	VITH SECTION 607.1503, FLORIDA STA FIGN CORPORATION TO TRANSACT BU VD - MICHIGAN LEXSING	SINESS IN THE STATE OF FLORIDA , /// C	
	poration; must include "INCORPORATED," " p." "Inc." "Co." or "Corp.")	COMPANY," "CORPORATION,"	
(If name unavailable	le in Florida, enter alternate corporate name ado	opted for the purpose of transacting busines	ss in Florida)
2. M/	CHIGAN 3	38-236 9627 (FEI number, if applicable)	·
(State or country)	3	(FEI number, if applicable)	<del>-                                    </del>
4. J	ULY1,1980 5.		ľ
(Date o	(UCY1, 1980 5	(Date of duration, if other than perp	octual)
6. LOA	N NOV'17 OR DEC'17		1
	(Date first transacted business in Fl (SEE SECTIONS 607.1501 & 607.1502		<b>A</b> 3
7. 709 B	RANTENBURG WAY, LUT	TZ. FC 33548	1
· · ·	(Principal	office address)	,
			<u>, !</u>
	(Current mailing a	address, if different)	
C. Ninney and stores.	address of Florida naviotanud a contra (D.O.)	Day NOT assentables	
8. Name and street	address of Florida registered agent: (P.O. I	sox <u>NOT</u> acceptable)	
Name:	LARRY KNOWLES	_	1 6 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Office Address:	709 BRANZOUBURC WAY	_	P.1 2: 27
	LUTZ	Florida 33548	2:
	(City)	(Zip code)	12
9. Registered agen Having been named	t's acceptance: I as registered ayent and to accept service	of process for the above stated corpo	ration at the place
designated in this a	pplication, I hereby accept the appointmen	nt as registered agent and agree to ac	t in this capacity. I
	nply with the provisions of all statutes rela niliar with and accept the obligations of n		rmance of my
			* 1
	(Dainway and		.
	(Registered age		
		ot more than 90 days prior to delivery of	

under the law of which it is incorporated.

11. Names and	business addresses of officers and/or directors:	 	
A. DIRECTOR		· ·	
Chairman:	LARRY KNOWLES		1
Address:	709 BRANTENBURG WAY		
	LUT2, FC 33548		
	JEFFREY KNOWLES	, 	
	20301 ASH GROVE	:	
	TAMPA, FL 33647		
	RYAN KNOWLES		
	20007 PERGOLA BEND	Į.	
	TAMPA, FL 33647		
	JEANIE GIEBLER		
	709 BRANZEN BURG WAY	-	
	LUTZ, FC	· :	
B. OFFICERS	<b>'</b>		1
	LARRY KNOWLOS		
	SEE ABOVE		
	<u> </u>		1
Vice President: _	JEFFREY KNOWLES	<u> </u>	<u> </u>
Address:	SEE ABOVE	= = = =	
			7,723
Secretary:	JEANIE GIESLER	<u> </u>	2
Address:	SEE ABOVE		<u>ځ</u>
V. PRE3 Treasurer:	RYAN KNOWLES		1
Address:	SEE ABOVE	* *	<u>]</u>
NOTE: If neces	ssary, you may attach an addendum to the application listing additional office	cers and/or directors	
12			1
are true and that a third degree fe	Signature of Director or Officer irector signing this document (and who is listed in number 11 above) affirm the or she is aware that false information submitted in a document to the Declony as provided for in s.817.155, E.S.		
13. <u>LA</u>	RRY KNOWLES TOTAL PRESIDENT	<del></del>	1
	(Typed or printed name and capacity of person signing application)	)	4



## Department of Licensing and Regulatory Affairs

Lansing, Michigan

This is to Certify That

MID-MICHIGAN LEASING, INC.

was validly incorporated on June 18, 1980 as a Michigan DOMESTIC 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 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 electronic transmission

Certificate Number: 17111132320

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 2nd day of November, 2017.

.

Julia Dale, Director

Corporations, Securities & Commercial Licensing Bureau

Verify this certificate at: URL to eCertificate Verification Search http://www.michigan.gov/corpverifycertificate.