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_	stration Secsion of Cor						
		MDWEST CORPO -	RATION				
SOBJECT.		Name o	of corporatio	n - mus	t include suffix		
Dear Sir or N	Aadam;						
"Certificate of	of Existence		of Good Sta	nding"	and check are sub	ct Business in Florida," omitted to register the	
Please return	all corresp	ondence concerni	ng this matte	er to the	following:		
Paul B. Steinb	erg, Esq						
		·-·	Name of	Person			
Steinberg & A	ssociates, P	.A.					
			Firm/Co	npany		··· <u>·</u>	
767 Arthur Go	odfrey Road						
			Add	ress			
Miami Beach.	FL 33140						
			City/State	and Zip	code		
pbs@senatorl:	aw.com						
	••	E-mail address	(to be used	for futt	re annual report r	notification)	
For further in	ıformation	concerning this m	atter, please	call:			
Paul B. Steinb	erg, Esq.		305 at (538) 538-2344 2 Daytime Telephone Number		
Nam	ne of Person	n	Area Co	de /	Daytime Telep	hone Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303					MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
	heek payabl	the following amo e to: FLORIDA DE S78.75 Filing Certificate o	PARTMEN g Fee &[□ \$78.7	CATE 75 Filing Fee & fied Copy	S87.50 Filing Fee, Certificate of Status & 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.

I	VEST CORPORATION corporation; must include "INCORPORATED,"	COMPANY " "CORPORATION"	_
"Inc.," "Co.," "C	Corp," "Inc," "Co," or "Corp.")	COMPANY, "CORPORATION,"	
	lable in Florida, enter alternate corporate name ad	opted for the purpose of transacting business in Florid	ia)
2. Michigan	3		
(State or count	ry under the law of which it is incorporated)	(FEI number, if applicable)	_
4	5,		
(Dat	e of incorporation)	(Date of duration, if other than perpetual)	_
6. August 24, 199	2		
	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1502	lorida, if prior to registration) , F.S., to determine penalty liability)	_
7. 400 GALLERIA	OFFICENTRE SUITE 101 SOUTHFIELD, MI 4	8034 USA	
	(Principal office	street address)	
		7.0	22
	(Current mailing a	ddress, if different)	= T1
			PR -
8. Name and stre	et address of Florida registered agent: (P.O. I	Box NOT acceptable)	5
Name:	Richard L. Steinberg, Esq.	MO.	15 型
runic.	767 Arthur Godfrey Road		AH 9: 00
Office Address:	707 Armin Godfrey Road		 O
	Miami Beach	, Florida	. 0
	(City)	(Zip code)	
O Registered ag	ent's acceptance:		
Having been nam	ent's acceptance: ted as registered agent and to accept service	of process for the above stated corporation at th	ie place
designated in this	s application, I hereby accept the appointmen	t as registered agent and agree to act in this ca	pacity. I
further agree to c and I am familia	omply with the provisions of all statutes rela with and accept the obligations of my positi	tive to the proper and complete performance of	'my duties,
1 11/11 / 11/11/11	with the occupative oungeners by my posm	on as registerea agent.	
	(Registered agent's signa	dure)	

^{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.

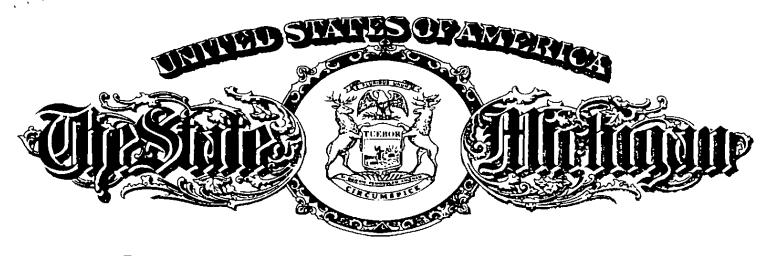
A. DIRECTORS ROBERT LEVIN Chairman Chairman □ Chairman Name: 400 GALLERIA OFFICENTRE □Vice Chairman Address: □Vice Chairman Address: Director □ Director SOUTHFIELD, MI 48034 **■**President ☐President ☐Vice President ☐ Vice President **■**Secretary **■**Treasurer ☐ Secretary ☐Treasurer MOther CEO □Other _____ Other ____ Other____ □Chairman □ Chairman Name: ____ □Vice Chairman Address: ☐Vice Chairman Address: Director ☐ Director ☐ President ☐ President □Vice President ___ ☐ Vice President ☐ Secretary ☐ Treasurer ☐ Secretary ☐ Treasurer Other _____ Other ____ Other ____ □ Chairman Name: □ Chairman Name: □Vice Chairman Address: □Vice Chairman Address: □Director ☐ Director ☐President ☐ President ☐ Vice President ☐Vice President ☐ Secretary ☐Treasurer ☐ Secretary ☐ Treasurer ☐ Other Other____ Other __ Other ___ Important Notice: Use an smachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed

individuals may be added to the index when filing your Florida Department of State Annual Report form.

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

ROBERT LEVIN



Department of Licensing and Regulatory Affairs

Lansing, Michigan

This is to Certify That

GLOBE MIDWEST CORPORATION

was validly incorporated on January 1, 1988 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: 22040198808

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 8th day of April, 2022.

Linda Clegg, Director

Corporations, Securities & Commercial Licensing Bureau