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(Req	uestor's Name)	
(Add	ress)	
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(City)	/State/Zip/Phoni	e #)
PICK-UP	MAIT	MAIL
(Busi	iness Entity Nar	ne)
(Doc	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	
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M. SOLOMON MAY - 9 2023

COVER LETTER

Divisi	tration Section ion of Corporations						
SUBJECT:	L & S APPRAISAL INC	-					
	Na	ame of corporatio	n - must include suffix				
Dear Sir or M	adam:						
"Certificate of		icate of Good Sta	r Authorization to Trans nding" and check are su ess in Florida.				
Please return	all correspondence con-	cerning this matte	er to the following:				
SAM YOUNIS	, PRESIDENT					D 3	
		Name of	f Person			023	
L & S APPRA	ISAL INC				<u> </u>	2023 HAY -9	
		Firm/Co	mpany		ララ カ-く	-9	F
455 E MAPLE	RD				RY OF	₽	
		Add	ress				C
TROY, MI 480	083				Em	<u>+</u>	
		City/State	and Zip code				
ACCOUNTIN	G@L-SAPPRAISALS.C	ОМ					
	E-mail ad	dress: (to be used	for future annual repor	t notification)			
For further in	formation concerning th	his matter, please	call:				
JAMES R SON	MMERVILLE CPA	248 at (302-9470		_		
Nam	e of Person	Area Co	de Daytime Tele	ephone Number	-		
Regis Divis The C	EET/COURIER ADD stration Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suit		Registration	Corporations 327			
Talla	hassee, FL 32303 check for the following				フ		
	neck payable to: FLORID ing Fee	DA DEPARTMEN	T OF STATE \$\Boxed\$ \\$78.75 \text{ Filing Fee & Certified Copy}	\$87.50 Filin Certificate of Certified Co	of Status	&	/

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.

L & S APPRA	ISAL, INC.			
(Enter name of "Inc.," "Co.," "	corporation; must include "INCORPORATED," Corp," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATION,"		
L & S APPRA	ISAL INC - FLORIDA			
(If name unava	lable in Florida, enter alternate corporate name a	dopted for the purpose of transacting business in Florida)		
MICHIGAN	3.	38-3605464		
(State or coun	3. Try under the law of which it is incorporated)	(FEI number, if applicable)		
06/06/2021	5.			
(Date of incorporation) 5.		(Date of duration, if other than perpetual)		
(Dai	e of incorporation)	(= and the amount of the amoun		
(Da	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.150	Florida, if prior to registration)		
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.150 ROAD TROY MICHIGAN 48083	Florida, if prior to registration) 12, F.S., to determine penalty liability)		
155 E MAPLE	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.150 ROAD TROY MICHIGAN 48083 (Principal office) (Current mailing	Florida, if prior to registration) 02, F.S., to determine penalty liability) e street address) address, if different)		
55 EMAPLE	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.150 ROAD TROY MICHIGAN 48083 (Principal office) (Current mailing)	Florida, if prior to registration) 12, F.S., to determine penalty liability) e street address) address, if different)		
55 EMAPLE	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.150 ROAD TROY MICHIGAN 48083 (Principal office) (Current mailing	Florida, if prior to registration) 02, F.S., to determine penalty liability) e street address) address, if different)		
Name and street	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.150 ROAD TROY MICHIGAN 48083 (Principal office) (Current mailing)	Florida, if prior to registration) 02, F.S., to determine penalty liability) e street address) address, if different)		
455 E MAPLE Name and stre	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.150) ROAD TROY MICHIGAN 48083 (Principal office) (Current mailing) ret address of Florida registered agent: (P.O. MURDOCK THOMAS	Florida, if prior to registration) 02, F.S., to determine penalty liability) e street address) address, if different)		

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.

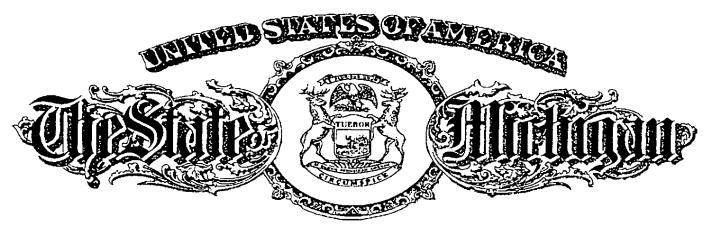
Amusicler & Time (Registered agent's signature)

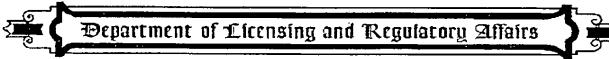
10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

Chairman	SAM YOUNIS Name:	□Chairman	Name:		
	Adiress:	□Vice Chairman	Address:		
Director	TROY MI 48083	Director			
i President		□President			
3Vice President		□Vice President			
I Secretary	()Treasure:	□ Securiary		Treasurer	
10 % а		□0thc		ОФет	
Ochairmen	MURDOCK THOMAS	□Chairman	Name:		
□Vice Chairman	3204 MORNING GLORY CT	□Vice Chairman	Address:		
□Director	PALM BACH GARDENS FL 33410	□Director			
□President		President			
□Vice President		□Vice President			
Sourcary	☐Treæsurer	Secretary		☐Treasurer	17 TO
□Ouber	[]Oba	Other		□Other	*T1
			N		الايد. سران
	Name:				3771
□Vice Chairmar	Address:				
Director		□Director			
□Pr esiden t		□President			
ÖVice Presidens					
Secretary	Tresurer			Treasurer	
Other	Other	Other		□Other	
mportant Notice ndividuals may b	Use an attachment to report more than six (6). The se added to the index when filing your Florida Depa	attachment will be imag riment of State Annual R	ed for reportic Leport form	g purposes only. Non-i	ndexed
2	Signature of Duas				
ماد ما ما العام الله	ector signing this document (and who is listed in nu false information submitted in a document to the De	mber 11 above) aftirms	that the facts st	rated herein are true an	d that he or

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





Lansing, Michigan

This is to Certify That

L & S APPRAISAL, INC.

was validly incorporated on June 6, 2001 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.

TURNER & Commercial Lines

Sent by electronic transmission

Certificate Number: 23050202808

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 9th day of May, 2023.

Linda Clegg, Director

Corporations, Securities & Commercial Licensing Bureau



February 25, 2023

SAM YOUNIS 455 E. MAPLE RD TROY, MI 48083

SUBJECT: L & S APPRAISAL INC Ref. Number: W23000026239

We have received your document for L & S APPRAISAL INC and check(s) totaling \$87.50. However, the document has not been filed and is being returned for the following reason(s):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company, "Corporation," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

The document must contain both the street address of the principal office and the mailing address of the entity.

The designation of the registered agent must be at a Florida street address.

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) 245-6053.

Yvette Scott Supervisor

Letter Number: 023A00004536