(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only

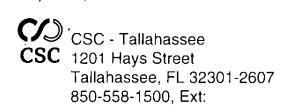


300427533403

24 HAY 17 PH 4: 01

RECEIVED

2021 MAY 17 PH 3: 25



To: Department Of State, Division Of Corporations

From: Amanda Miller

Ext:

Date: 05/17/24 Order #: 1496332-1

Re: Great Lakes Pension Associates, Inc.

Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Application for Certificate of Authority

Amount to be deducted from our State Account: \$70.00 - FL State Account Number:

12000000195

Certificate of Good Standing from State of Incorporation

AUTH

Please take the following action:

File in your office on basis

Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

COVER LETTER

_	tration Section ion of Corporations				
SUBJECT:	Great Lakes Pension Associates. Inc.				
	Name of	`corporation	- must include suffix		
Dear Sir or M	adam:				
"Certificate of	"Application by Foreign Corp f Existence," or "Certificate of ced foreign corporation to train	f Good Stan	ding" and check are sub-		
Please return :	all correspondence concerning	g this matter	to the following:		
Rebecca Lewis					
		Name of	Person		
Clark Hill PLC					
-		Firm/Com	pany		
301 Grant Stre	et, 14th Floor				
		Addre	rss	·	
Pittsburgh, PA	15219				
		City/State a	nd Zip code		
	F-mail address:	to be used f	or future annual report n	otification)	
For further inf	ormation concerning this mat	•	·	,	
Rehecca Lewis 31,412 3		394-7742	Daytime Telephone Number		
Name	e of Person	Area Code	: Daytime Teleph	ione 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		
	check for the following amou eck payable to: FLORIDA DEF ng Fee	PARTMENT Fee &	OF STATE I \$78.75 Filing Fee & Certified Copy	☐ \$87.50 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.

"Inc" "Co" "C	corporation; must include "INCORPORATED," Corp." "Inc." "Co." or "Corp.")			_
(If name unavai	lable in Florida, enter alternate corporate name ad	lopted for the purpose of transacting business in Flo	rida)	
2. Michigan	3.			
(State or count	y under the law of which it is incorporated)	(FEI number, if applicable)		-
4. 09/27/1982	5			
(Date of incorporation)		(Date of duration, if other than perpetual)		-
6.				
77777	e Mile Road. Farmington Hills, MI 48331 (Principal office	e <u>street</u> address)	24 H	ISTAIC 3S
	(Current mailing	address, if different)	AY 17	CRETAR
8. Name and stre	et address of Florida registered agent: (P.O.	Box <u>NOT</u> acceptable)		33 G
Name:	Corporation Service Company	<u> </u>	PH 4: 0	STATE
Office Address:	1201 Hays Street		-	XX.
Office Address.				
Office Address.	Tallahassee	, Florida 32301		

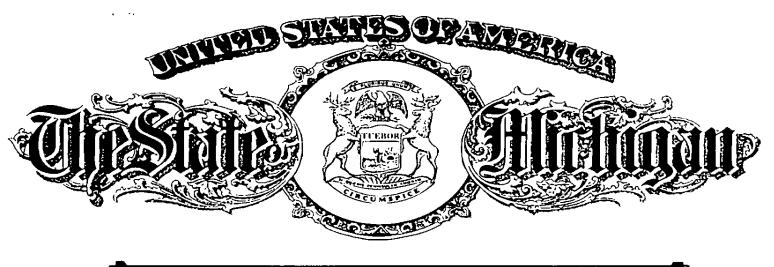
9. Registered agent's acceptance:

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.

Corporation Service Company	
By:	
(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.

A. DIRECTORS				
□Chairman ·	Name:	□Chairman	Name: Edward N. Brown	
□Vice Chairman	Address: 37923 W. Twelve Mile Road	□Vice Chairman	Address: 37923 W. Twelve Mile Road	
Director	Farmington Hills, MI 48331	□Director	Farmington Hills, MI 48331	
President		□President		
□Vice President		■ Vice President		
☐ Secretary	□Treasurer	☐ Secretary	□Treasurer	
□Other	□Other	□Other	Other	
□Chairman	Name:David C. Fillo	□Chairman	Name: Christine A. Kooy	
□Vice Chairman	Address: 37923 W. Twelve Mile Road	□ Vice Chairman	Address: 37923 W. Twelve Mile Road	
□Director	Farmington Hills, MI 48331	□Director	Farmington Hills, MI 48331	
□President		□President		
■ Vice President		□ Vice President		
Secretary	□Treasurer	☐ Secretary	Treasurer	
□Other	Other	□Other	□Other	
	Name:		Name:	
□ Director	Address.	□ Director	Address.	
□President		□President	···	
□Vice President		□Vice President		
		□ Secretary	☐ Treasurer	
☐Secretary ☐Other	☐ Treasurer	Other		
Other				
individuals may be	Use an attachment to report more than six (6). The added to the index when filing your Florida Dep	e attachment will be imaged artment of State Annual Re	d for reporting purposes only. Non-indexed port form.	
12. /s/ Judy K. E	Brown			
	Signature of Dire	ctor or Officer	-	
	etor signing this document (and who is listed in n lse information submitted in a document to the D			





Lansing, Michigan

This is to Certify That

GREAT LAKES PENSION ASSOCIATES, INC.

was validly incorporated on September 27, 1982 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.

CONTRACTOR & COMMERCIAL LEGISLAND

Sent by electronic transmission

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 17th day of May, 2024.

Linda Clegg, Director

Corporations, Securities & Commercial Licensing Bureau

Certificate Number: 24050368006