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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

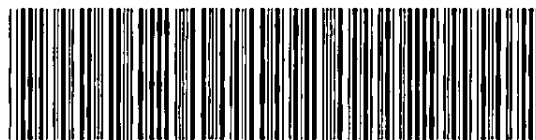
(Business Entity Name)

(Document Number)

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2024 SEP 25 PM 2:29

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** EMILY JOHN, LLC

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

ALYCIA WESLEY

\_\_\_\_\_  
Name of Person

COLOMBO & COLOMBO, P.C.

\_\_\_\_\_  
Firm/Company

40701 WOODWARD AVE, SUITE 50

\_\_\_\_\_  
Address

BLOOMFIELD HILLS, MI 48304

\_\_\_\_\_  
City/State and Zip Code

APW@COLOMBOPC.COM

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ALYCIA WESLEY

248

645-9300

at ( )

\_\_\_\_\_  
Name of Contact Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☒ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &  
Certificate of Status

☐ \$155.00 Filing Fee &  
Certified Copy

☐ \$160.00 Filing Fee, Certificate  
of Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS  
IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY  
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. EMILY JOHN, LLC  
(Name of Foreign Limited Liability Company, must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. MICHIGAN  
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 99-4825271  
(FEI number, if applicable)

4. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 1213 Dorchester Road  
(Street Address of Principal Office)

6. 1213 Dorchester Road  
(Mailing Address)

Birmingham, MI 48009

Birmingham, MI 48009

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida 32301  
(City) (Zip code)

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated limited liability company 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.

Arsalan Malik  
(Registered agent's signature) Arsalan Malik - Assistant Secretary

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8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

| <u>Title or Capacity:</u>                   | <u>Name and Address:</u>               | <u>Title or Capacity:</u>                   | <u>Name and Address:</u>               |
|---|--|---|--|
| <input type="checkbox"/> Manager            | Name: <u>Paul J. Bernhard</u>          | <input checked="" type="checkbox"/> Manager | Name: <u>Emily Delaney</u>             |
| <input checked="" type="checkbox"/> Member  | Address: <u>1213 Dorchester Road</u>   | <input checked="" type="checkbox"/> Member  | Address: <u>222 Corner Ridge Road</u>  |
| <input type="checkbox"/> Authorized         | <u>Birmingham, MI 48009</u>            | <input type="checkbox"/> Authorized         | <u>Aurora, Ontario L4G 6L5, CANADA</u> |
| Person                                      | <u></u>                                | Person                                      | <u></u>                                |
| <input type="checkbox"/> Other <u></u>      | <input type="checkbox"/> Other <u></u> | <input type="checkbox"/> Other <u></u>      | <input type="checkbox"/> Other <u></u> |
| <input checked="" type="checkbox"/> Manager | Name: <u>John Bernhard</u>             | <input type="checkbox"/> Manager            | Name: <u></u>                          |
| <input checked="" type="checkbox"/> Member  | Address: <u>104 Trailwood Court</u>    | <input type="checkbox"/> Member             | Address: <u></u>                       |
| <input type="checkbox"/> Authorized         | <u>Fomey, TX 75126</u>                 | <input type="checkbox"/> Authorized         | <u></u>                                |
| Person                                      | <u></u>                                | Person                                      | <u></u>                                |
| <input type="checkbox"/> Other <u></u>      | <input type="checkbox"/> Other <u></u> | <input type="checkbox"/> Other <u></u>      | <input type="checkbox"/> Other <u></u> |
| <input type="checkbox"/> Manager            | Name: <u></u>                          | <input type="checkbox"/> Manager            | Name: <u></u>                          |
| <input type="checkbox"/> Member             | Address: <u></u>                       | <input type="checkbox"/> Member             | Address: <u></u>                       |
| <input type="checkbox"/> Authorized         | <u></u>                                | <input type="checkbox"/> Authorized         | <u></u>                                |
| Person                                      | <u></u>                                | Person                                      | <u></u>                                |
| <input type="checkbox"/> Other <u></u>      | <input type="checkbox"/> Other <u></u> | <input type="checkbox"/> Other <u></u>      | <input type="checkbox"/> Other <u></u> |

**Important Notice:** Use an attachment 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.

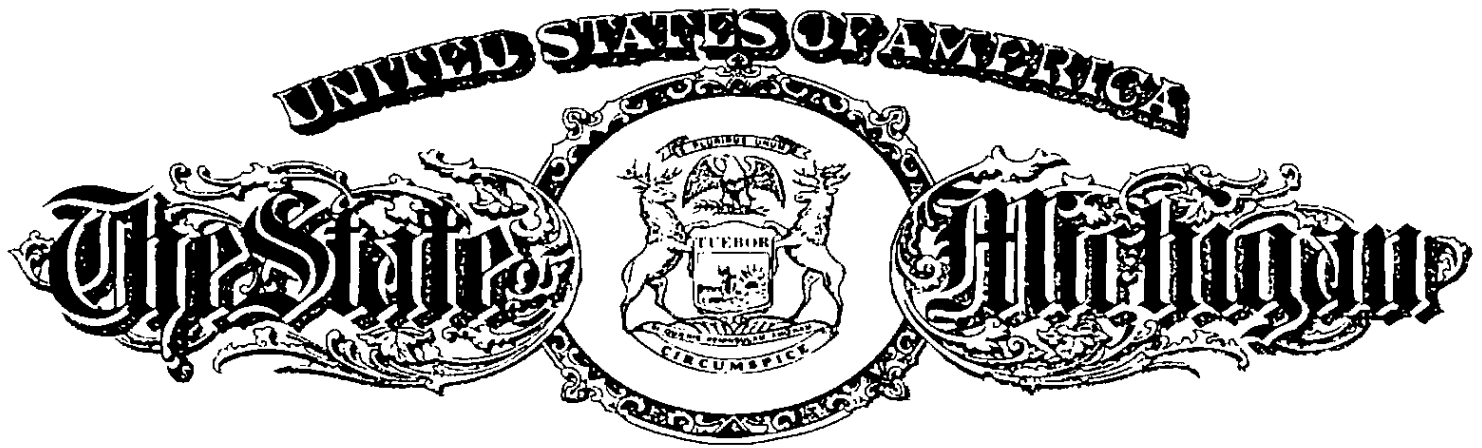
9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any 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.

  
Signature of an authorized person

Paul J. Bernhard

Typed or printed name of signer



Department of Licensing and Regulatory Affairs

Lansing, Michigan

This is to Certify That

**EMILY JOHN, LLC**

was validly authorized on August 19, 2024, as a Michigan  
DOMESTIC LIMITED LIABILITY COMPANY  
and said limited liability company is validly in existence under the laws of this state and has satisfied its  
annual filing obligations.

This certificate is issued pursuant to the provisions of 1993 PA 23 to attest to the fact that the company is  
in good standing in Michigan as of this date.

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: 24090411702

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

Linda Clegg, Director

Corporations, Securities & Commercial Licensing Bureau

CHARLES A. LEFEBVRE  
LAWRENCE F. RANISZESKI  
ERIC R. BOWDEN  
ALYCIA P. WESLEY  
NICHOLAS J. RANKE  
CAMERIN S. SHARAK

DIRECT E-MAIL:  
apw@colombopc.com

# Colombo & Colombo

A PROFESSIONAL CORPORATION

ATTORNEYS AND COUNSELORS AT LAW  
40701 WOODWARD AVENUE, SUITE 50 • P.O. BOX 2028  
BLOOMFIELD HILLS, MICHIGAN 48303-2028  
(248) 645-9300 • FACSIMILE (248) 645-5418  
WWW.COLOMBOPC.COM

LOUIS J. COLOMBO (1883 - 1959)  
LOUIS J. COLOMBO, JR. (1911 - 1979)  
FREDERICK COLOMBO (1916 - 1999)

OF COUNSEL  
THE WEIKERT LAW FIRM, PLLC

September 20, 2024

Registration Section  
Division of Corporations  
Florida Department of State  
P.O. Box 6327  
Tallahassee, Florida 32314

Re: Emily John, LLC

Dear Sir/Madam:

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transaction Business in Florida," Michigan certificate of existence and a check in the amount of \$125.00 are hereby submitted to register the above-referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Alycia Pallach Wesley  
COLOMBO & COLOMBO, P.C.  
40701 Woodward Avenue, Suite 50  
Bloomfield Hills, MI 48304

apw@colombopc.com

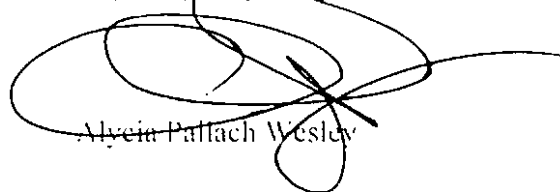
For further information concerning this matter, please call:

Alycia Pallach Wesley at (248) 645-9300

A self-addressed, stamped return envelope is enclosed for your use if needed.

Very truly yours,

COLOMBO & COLOMBO



Alycia Pallach Wesley

APW:nta/Enclosures