

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

LIMITED LIABILITY COMPANY REINSTATEMENT				FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS		FILED CLERK OF STATE DIVISION OF CORPORATIONS 06 JUN 14 PH 1:48	
DOCUMENT # L04000040017							
1. Limited Liability Company's Name ALC-Boca Raton, LLC							
2. Principal Office Address 200 Glades Road Suite, Apt. #, etc. 1A City & State Boca Raton, FL Zip 33432 Country USA				3. Mailing Office Address 24555 Hallwood Court Suite, Apt. #, etc. City & State Farmington Hills, MI Zip 48335 Country USA			
4. State/Country of Formation Florida/USA				5. Date Organized or Qualified To Do Business in Florida 7/19/04			
6. FEI Number 20-1246209				Applied For ☐ Not Applicable			
7. CERTIFICATE OF STATUS DESIRED ☐				SEE INSTRUCTIONS FOR REQUIRED DOCUMENTS			

CR2E041 (8/05)

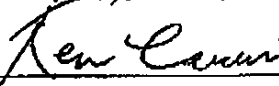
8. Name and Address of Current Registered Agent	
Name Julia Hensley	
Street Address (P.O. Box Number is Not Acceptable) 200 Glades Road	
Suite, Apt. #, Etc. 1A	
City Boca Raton	State FL Zip Code 33432

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9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.	
Signature of Registered Agent 	Date 4/21/06
REGISTERED AGENT MUST SIGN	

10. Names and Street Addresses of Managing Members/Managers			
Title	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
Exec. V.P., Gen. M.	Kevin Piecuch	24555 Hallwood Court	Farmington Hills, MI 48335

REINSTATEMENT **2005-06**

11. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in chapter 608, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 608.406, F.S., and that all fees owed by the limited liability company have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.	
Signature of Managing Member/Manager 	Date 4/19/06 Daytime Phone # 248-926-8250
Typed or printed name of signing Managing Member/Manager Kevin Piecuch	