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DSA

ARCHITECTS PLANNERS

TRANSMITTAL

MJH

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

SUBJECT: Duce Simmons Associates, LLC

FROM: Anthony Duce

DATE: April 13, 2001

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-04/19/01--01091--013
****160.00 ****160.00

Dear Sir or Madam:

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida", original "Certificate of Existence" from the state of Michigan, signed "Certificate of Designation of Registered Agent/Registered Office", 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:

Anthony Duce
Duce Simmons Associates
2100 W. Big Beaver Rd., Suite 214
Troy, Michigan 48084

Should you need to call someone concerning this matter, please call:

Susan Brozes at 248-816-6510

Enclosed is a check for \$160.00 to cover the following fees:

| | |
|----------|---------------------------------|
| \$100.00 | Filing fee for Application |
| \$ 25.00 | Designation of Registered Agent |
| \$ 30.00 | Certified Copy |
| \$ 5.00 | Certificate of Status |

Thank you.

Duce Simmons Associates
2100 West Big Beaver Road, Suite 214
Troy, Michigan 48084

Phone (248) 816-6510
Fax (248) 816-6514

FILED
01 APR 19 PM 1:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

*IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN
LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:*

1. Duce Simmons Associates, LLC
(Name of foreign limited liability company)
2. Michigan
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 38-3404316
(FEI number, if applicable)
4. April 7, 1998
(Date of Organization)
5. Perpetual
(Duration: Year limited liability company will cease to exist or "perpetual")
6. Pending
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))
7. 2100 W. Big Beaver Road, Suite 214
Troy, MI 48084
(Street address of principal office)

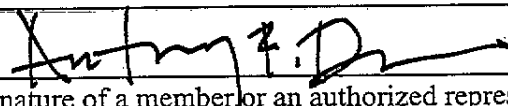
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

8. If limited liability company is a manager-managed company, check here ☒ **X**
9. The name and usual business addresses of the managing members or managers are as follows:
- 2100 W. Big Beaver Road, Suite 214
- Troy, MI 48084
- _____
- _____

10. Attached is an original 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. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: _____

Architectural Services


Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Anthony R. Duce

Typed or printed name of signee

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES,
THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING
STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE
STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

Duce Simmons Associates, LLC

2. The name and the Florida street address of the registered agent and office are:

CT Corporation System

(Name)

1200 South Pine Island Road

Florida street address (P.O. Box **NOT** ACCEPTABLE)

Plantation

- FL

33324

City/State/Zip

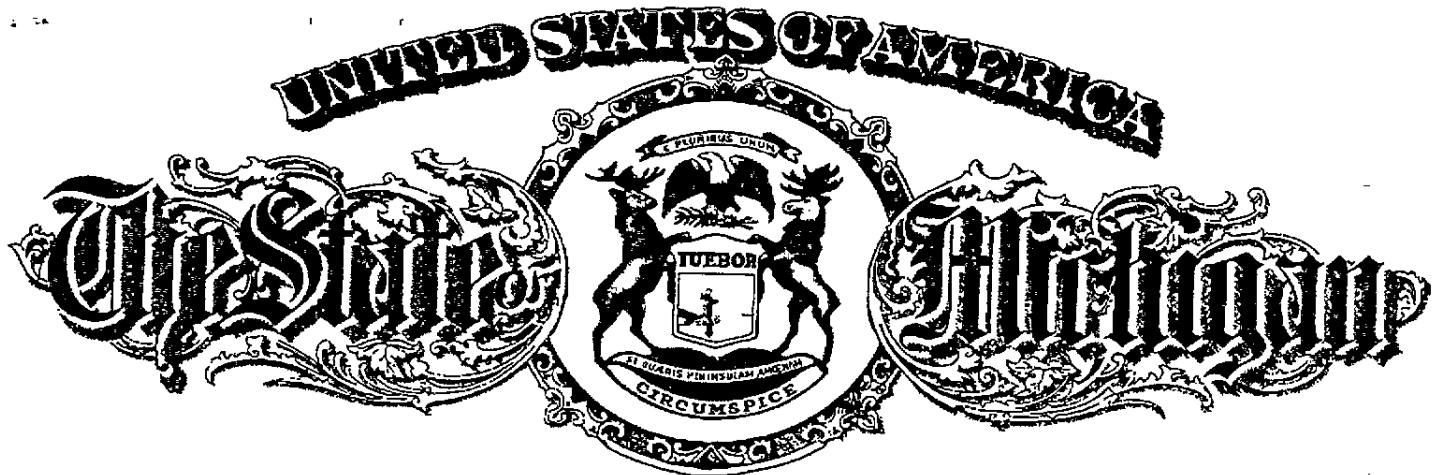
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

Claudia L. Saari

(Signature)

Asst. Secretary

| | |
|-----------|----------------------------------|
| \$ 100.00 | Filing Fee for Application |
| \$ 25.00 | Designation of Registered Agent |
| \$ 30.00 | Certified Copy (optional) |
| \$ 5.00 | Certificate of Status (optional) |



Michigan Department of Consumer and Industry Services

Lansing, Michigan

This is to Certify That

DUCE SIMMONS ASSOCIATES, LLC

a Michigan limited liability company, was formed on April 8, 1998.

I FURTHER CERTIFY that a Certificate of Dissolution has not been filed and the Articles of Organization are in full force and effect 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.

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 5th day of April, 2001

Andrew L. Mitchell, Director

Bureau of Commercial Services