M04000000097

| (Re | equestor's Name) | |
|-------------------------|--------------------|---|
| (Ac | idress) | |
| (Ac | idress) | |
| , | | |
| (Ci | ty/State/Zip/Phone | ÷#) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | ısiness Entity Nan | ne) |
| (Do | ocument Number) | |
| Certified Copies | Certificates | of Status |
| Special Instructions to | Filing Officer: | |
| | | |
| | | |
| | | |
| | | 1/9/1 |
| | Office Use Onli | ~ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ |



200025782662

01/05/04--01045--015 **155.00

O4 JAN -5 PM 5: 31 SELECTIVE OF STATE TALLAHASSEE, FLORIC

KEMP KLEIN

KEMP, KLEIN, UMPHREY, ENDELMAN & MAY, P.C. A T T O R'N E Y S

201 WEST BIG BEAVER, SUITE 600 . TROY, MICHIGAN 48084 . (248) 528-1111 . FAX (248) 528-5129 . WWW.KKUE.COM

December 30, 2003

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

Re: 7342 Weeping Willow LLC Our File No. 740246-2 O4 JAN - 5 PM 5: 31
SECRETARY OF 5.7512

Ladies and Gentlemen:

Enclosed in duplicate is an Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida together with a Certificate of Existence in regard to the captioned entity. Also enclosed is a check issued to the "State of Florida" in the amount of \$155 to cover the filing fees, Designation of Registered Agent and a certified copy.

Please return all correspondence concerning this matter to the undersigned.

If you require any additional information please call me.

Very truly yours,

KEMP, KLEIN, UMPHREY, ENDELMAN & MAY, P.C.

maria D. Pollock

By:

Marcia D. Pollock Legal Assistant

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: 7342 Weeping Willow LLC (Name of foreign limited liability company) 2. Michigan (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) 4. 12/8/2003 Perpetual Duration: Year limited liability company will cease to (Date of Organization) exist or "perpetual") Upon Authorization to transact business in Florida (Date first transacted business in Florida, (See sections 608,501, 608,502, and 817,155, F.S. 7342 Weeping Willow Drive, Sarasota, Florida 34241-6432 931 Lampost Lane, Bloomfield, MI 48304-1942 (Street address of principal office) 8. If limited liability company is a manager-managed company, check here 9. The name and usual business addresses of the managing members or managers are as follows: Wilson J. West, Jr., 931 Lampost Lane, Bloomfield, MI 48304-1942 Jill M. Clair, 3857 Farhill, Bloomfield Hills, MI 48304 Mary L. Lynch, 68512 Wingate, Romeo, MI 48095 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: Real Estate Investment 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.) Jill M. Clair, Member

Typed or printed name of signee

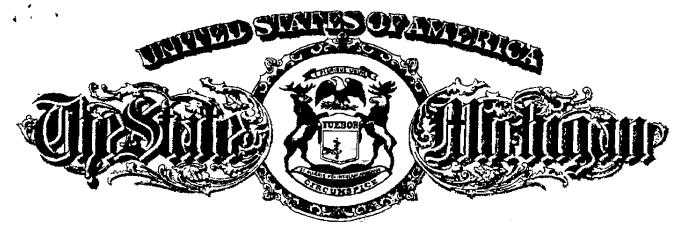
CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

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: | | | |
|---|--------|--|--|
| 7342 Weeping Willow LLC | | | |
| 2. The name and the Florida street address of the registered agent and office are: | | | |
| JILL M. CLAIR | | | |
| (Name) | | | |
| 7342 Weeping Willow Drive | | | |
| Florida street address (P.O. Box NOT ACCEPTABLE) | i I | | |
| Sarasota 34241-6432 $\frac{\overline{D}_{F}}{\overline{D}_{F}}$ $\frac{\omega}{\omega}$ | | | |

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.

\$ 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 Serbices

Lansing, Michigan

This is to Certify That

7342 WEEPING WILLOW LLC

was validly organized on December 8, 2003 as a Limited Liability Company. 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, as amended, 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 Facsimile Transmission 762211

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 22nd day of December, 2003

Bureau of Commercial Services

,Director