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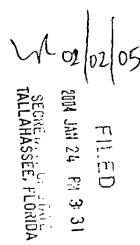
(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					





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01/24/05--01080--002 **468.75





TRA	NSMITTAL LETTER
TO: Registration Section Division of Corporations	
SUBJECT: Wellspring Preparatory Company,	
(Name of	Limited Liability Company)
	d Liability Company for Authorization to Transact Business in are submitted to register the above referenced foreign limited da
Please return all correspondence concerning to	his matter to the following:
Danielle A. Phillip	os
44	(Name of Person)
Wellspring Preparatory Company, LL	c
······································	(Address) ACCRE FLORID (Address)
	ASS TO THE
3850 Broadmoor SE, Ste. 206	HAZ Z
	(Address) (Address) (Address) (Address) (Address)
	平 至
Grand Rapids, Michigan 4951	
	ty/State and Zip Code)
For further information concerning this matter	r, please call:
Danielle A. Phillips	at (616) 954-3090
(Name of Person)	(Area Code & Daytime Telephone Number)
STREET ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
409 E. Gaines Street	P.O. Box 6327
Tallahassee, Florida 32399	Tallahassee, Florida 32314
Enclosed is a check for the following amount:	

□ \$125.00 Filing Fee

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

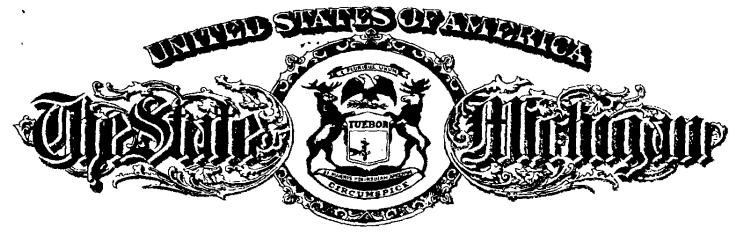
IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1.	Wellspring Preparatory Company, LLC				
•	(Name of Foreign L	imited Li	ability Company)		
2.	Michigan	3.	20-2073952 (FEI number, if applicable		
	(Jurisdiction under the law of which foreign limited li company is organized)	ability	(FEI number, if applicable	;)	
4.	1. November 23, 2004	5.	Perpetual		
	(Date of Organization)		(Duration: Year limited liability comparexist or "perpetual")	y will cease	to
6.					
	(Date first transacted busine (See sections 608.501 & 608.				
7.	7. 3850 Broadmoor SE, Ste. 201				
	Grand Rapids, Michigan 49512				
	(Street /	Address o	f Principal Office)	HE A::	
8.	8. If limited liability company is a manager-ma	anaged c	company, check here 🔽	338 2. 711.1	2001 JAN 24 PH
9.	. The name and usual business addresses of the managing members or managers are as follows				ڇ اُر ښ
	Greg Lambert, Manager, 3850 Broadmoor SE,	Ste. 201	Grand Rapids, Michigan 49512	Ric.	ن
the trai	O. Attached is an original certificate of existence, no more rejurisdiction under the law of which it is organized. (A paraslation of the certificate under oath of the translator must 1. Nature of business or purposes to be condu	hotocopy t be submi	is not acceptable. If the certificate is in a foreitted.)		
	• •				
	Non-profit private schools				 ·
	Dreat	<u></u>			
	(In accordance with section 608.4	408(3), F.S.	corized representative of a member. In the execution of this document constitutes by that the facts stated herein are true.		
	Greg Lambert				
	Typed or j	printed r	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 Cor	npany is:		
Wellspring Preparatory Company LLC			
2. The name and the Florida street address	ss of the registered a	gent and office are:	
Leonard H. Johnson, Esq.		·	<u> </u>
	(Name)		
37837 Meridian Ave., Ste.	 		
Florida Street A			
Dade City	FL	33525	
	City/State/Zip		
Having been named as registered agent and liability company at the place designated in agent and agree to act in this capacity. If relating to the proper and complete performability of my position as registered agent.	n this certificate, I he arther agree to compl nance of my duties, a	reby accept the appoint by with the provisions o and I am familiar with a	tment as registered f all statutes and accept the
Samuel Myhnes (Signature) \$ 100.0 \$ 25.0 \$ 30.0	0 Designation of 0 Certified Copy	Registered Agent (optional)	2004 JAN 24 PM 3: 31 SECRETANT CONSTRAINT TALLAHASSEE, FLORIDA
\$ 5.0	0 Certificate of St	atus (optional)	,



Michigan Department of Consumer and Industry Services

Lansing, Michigan

This is to Certify That

WELLSPRING PREPARATORY COMPANY, LLC

was validly organized on November 23, 2004 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 facilitat they 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.

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 14th day of December, 2004

Bureau of Commercial Services

.Director