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(Re	questor's Name)	
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DA)	dress)	
(Cit	y/State/Zip/Phone	<i>f</i> f)
PICK-UP	☐ WAIT	MAIL
(Bu	sin ess Entity Nam	e)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Compass South, LLC (Name of Limited Liability Company)			
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transflorida," Certificate of Existence, and check are submitted to register the above referenced for liability company to transact business in Florida			
Please return all correspondence concerning this matter to the following:			
Shelly M. Rayment			
(Name of Person)			
Hertz, Schram & Saretsky, P.C.		05 Å:	
(Firm/Company)	- · ·	٠٠,	
1760 S. Telegraph Road, Suite 300 (Address)	(1) (1) (1) (1)	្ន គឺ ភ	
(1.444.055)	싫ੜ	32:	
Bloomfield Hills, MI 48302	112	٠,,.	
(City/State and Zip Code)			
For further information concerning this matter, please call:			
Lisa Kavalhuna or Shelly Rayment at (248) 335-5000			
(Name of Person) (Area Code & Daytime Telephone N	umber)		
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327			
Tallahassee, Florida 32399 Tallahassee, Florida 32314			
Enclosed is a check for the following amount:			
☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & ☐ \$155.00 Filing Fee & ☐ \$160.00 Filing I	Fee, Certific tus & Certifi		,

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. Compass South	ı, LLC					
	(Name of Foreign Limit	ted Liability	Company)			
2. Michigan		3.				
	r the law of which foreign limited liabili ized)		(FEI nu	mber, if applicab	e)	
4. April 21, 2004		5. Perp	etual			
	ate of Organization)	(Di	ration: Year limi st or "perpetual")	ted liability compa	any will cease t	0
5. January 1, 200	5				14 ₂₇ 2	्री
·	(Date first transacted business in (See sections 608.501 & 608.502	Florida, if F.S. to deter	prior to registration	on.) oility)		- 5
7. 580 N. Spanish	Drive				 .,	· Þ
Longboat Key, i	FL 34228				50)	
	(Street Addr	ress of Princ	ipal Office)			
3. If limited liabi	ility company is a manager-manag	ged compa	ny, check here	: 🗆	المتت	හ
7. The name and	usual business addresses of the m	nanaging n	nembers or ma	nagers are as fo	ollows:	
Paul T, Freiwa	ld, 580 N. Spanish Drive, Longboat K	Key, FL 34	228 (As Tenant	s by the Entirety	with Kim)	
Kim Freiwald,	580 N. Spanish Drive, Longboat Key,	, FL 34228	(As Tenants b	y the Entirety wit	h Paul)	_
he jurisdiction under	ginal certificate of existence, no more than the law of which it is organized. (A photo ficate under oath of the translator must be s	copy is not a				
.1. Nature of bus	siness or purposes to be conducted	d or promo	oted in Florida	holding interes	t in real estat	<u>e,</u>
intellectual prop	erty and engaging in any and all activ	vities relate	d thereto			•
<u> </u>	Rie M. Kar	olle				
	Signature of a member or an (In accordance with section 608.408(3 an affirmation under the penalties of penal	3), F.S., the ex	ecution of this doc	ument constitutes		
	Lisa M. Kavalhuna, Authorized					

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

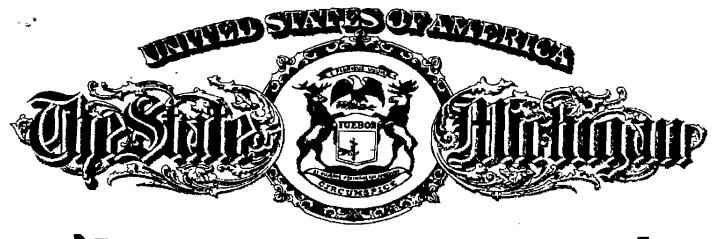
PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

Compass South,	the Limited Liability Co	• •		
2. The name ar	nd the Florida street addre	ess of the registered agent and office are:		
	Paul T. Freiwald			
		(Name)	_	
	580 N. Spanish Drive		- 1	
Florida Street Address (P.O. Box NOT ACCEPTABLE)		****		
	Longboat Key	FL 34228 City/State/Zip	4 M 10: 28	

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, Florida Statutes.

\$ 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 Labor & Economic Growth



Lansing, Michigan

This is to Certify That

COMPASS SOUTH, LLC

was validly organized on April 21, 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 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 836426 In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 5th day of April, 2005

Bureau of Commercial Services

,Director