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(Requestor's Name)					
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PICK-UP WAIT MAIL					
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SECRETARY OF STATE DIVISION OF CORPORATION

#### TRANSMITTAL LETTER

TO: Registration Section

Division of Corporations		
SUBJECT: Development Services Group, LLC		
50202011	mited Liability Company)	
The enclosed "Application by Foreign Limited Li Florida," Certificate of Existence, and check are sliability company to transact business in Florida	submitted to register the above referenced	
Please return all correspondence concerning this	matter to the following:	
Angela Kasmer		SECRE DIVISION
	ame of Person)	or co
Development Services Group, LLC		PA RPOS
(F	irm/Company)	PM I2: 27
500 Avis Drive, Suite 200		
	(Address)	
Ann Arbor, MI 48108		
(City/S	tate and Zip Code)	•
For further information concerning this matter, pl	ease call:	
Angela Kasmer	at (734 ) 786-7200	<u> </u>
(Name of Person)	(Area Code & Daytime Telephone N	lumber)
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  \$130.00 Filing Fee & Certificate o	☐ \$155.00 Filing Fee & ☐ \$160.00 Filing of Status Certified Copy of States	Fee, Certificate tus & Certified Copy

### 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.	Development Services Group, LLC		
-	(Name of Foreign Limited Liability Company)		
	Michigan  (Jurisdiction under the law of which foreign limited liability company is organized)  3. 38-3304-392  (FEI number, if applicable)		
4.	July 22, 1996  (Date of Organization)  5. Perpetual  (Duration: Year limited liability company will ce exist or "perpetual")	ase to	<del>-</del>
6.	N/A  (Date first transacted business in Florida, if prior to registration.)		
7.	(See sections 608.501 & 608.502 F.S. to determine penalty liability) 500 Avis Drive, Suite 200, Ann Arbor, MI, 48108	05 JUL	SECRI
		င်္	DF CI
	(Street Address of Principal Office)	3	중유민
8.	If limited lightlity company is a manager managed company shook hara	2	Y OF STATE
9.	The name and usual business addresses of the managing members or managers are as follows:		75
	James G. Haeussler, William C. Henderson, Robert G. Macomber, Dennis J. Michalak, Richard G. Timr	nons	<u>,                                     </u>
	Brian R. Wenzel; 500 Avis Drive, Suite 200, Ann Arbor, MI 48108		
the trai	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custod cjurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language inslation of the certificate under oath of the translator must be submitted.)	-	 ecords in
11	. Nature of business or purposes to be conducted or promoted in Florida:		~
	Real Estate Development		<b>_</b> .
	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.)		
	Robert G. Macomber		

Typed or printed name of signee

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

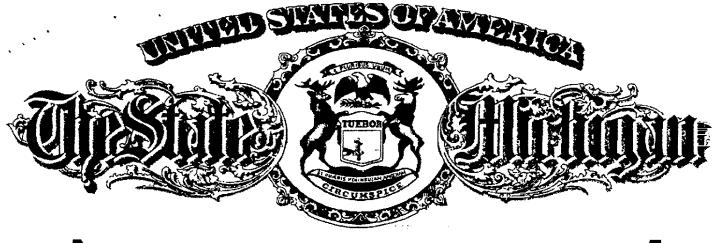
PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the	ne Limited Liability Compa	ny is:		
Strategic Developm	nent Solutions		· · · · · · · · · · · · · · · · · · ·	
2. The name and	the Florida street address o	f the registered	agent and office are:	
	CT Corpo	oration		DIVIS 05
(Name)			JUL SORET	
1200 South Pine Island Road			5 PRY	
	Florida Street Addre	ess (P.O. Box NO	T ACCEPTABLE)	OF STATE REPORATION PM 12: 27
	Plantation,	FL	33324	ATTENS 13: 27
_		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, Florida Statutes.

Gignature) Claudia L. Saari
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)





Lansing, Michigan

This is to Certify That

#### DEVELOPMENT SERVICES GROUP, LLC

was validly organized on July 22, 1996 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.



In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 27th day of April, 2005

Bureau of Commercial Services

,Director