M06000005249

| (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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Office Use Only



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FILED

06 SEP 22 AM 8: 25

SECRETARY OF STATE

COVER LETTER

| TO: Registration Section Division of Corporations |
|--|
| SUBJECT: BOSINESS GROUP, LLC (Name of Limited Liability Company) |
| The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, 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: |
| (Name of Person) |
| POLICESTER BUSINESS GROOP, LLC. (Firm/Company) |
| 414 East 9. Se 150 (Address) |
| City/State and Zip Code) |
| For further information concerning this matter, please call: |
| Miguol Coclor at (517) 202-5009 (Name of Person) (Area Code & Daytime Telephone Number) |
| MAILING ADDRESS: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 |
| Enclosed is a check for the following amount: \$\Begin{align*} \Begin{align*} \Lambda \text{125.00 Filing Fee} \text{ Filing Fee & \$\Begin{align*} \Begin{align*} \Begin{align*} \Lambda \text{130.00 Filing Fee & }\Description \text{Status & Certified Conv.} \Rightarrow \text{Optified Conv.} \Ri |



September 6, 2006

MIGUEL CODER 414 EAST STREET SUITE 150 ROCHESTER, MI 48307

SUBJECT: ROCHESTER BUSINESS GROUP LLC

Ref. Number: W06000039206

We have received your document for ROCHESTER BUSINESS GROUP LLC and your check(s) totaling \$130.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Letter Number: 406A00053993

Neysa Culligan Document Specialist

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

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. Box | Name of Foreign Limited Liability Company) | |
|--|--|------------------------------|
| | (Name of Foreign Limited Liability Company) | |
| 2. Uurisdiction under t company is organize | the law of which foreign limited liability (FEI number, i ed) | f applicable) |
| 4. February (Date | e of Organization) 5. Octobrock (Duration: Year limited liab exist or "perpetual") | illity company will cease to |
| 6. <u> </u> | (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) | 06 SEF SECRE TALLAH |
| 7. 414 | East St. Sta 150 | FILL P 22 NASSE |
| Proch | (Street Address of Principal Office) | E, FLO |
| 8. If limited liabili | ity company is a manager-managed company, check here | ATE DRIDA |
| 9. The name and u | asual business addresses of the managing members or manager 2) Codes 414 East 21. Sho 150 | |
| the jurisdiction under th | inal certificate of existence, no more than 90 days old, duly authenticated by the ne law of which it is organized. (A photocopy is not acceptable. If the certificat | |
| translation of the certifi | cate under oath of the translator must be submitted.) | |
| 11. Nature of busi | iness or purposes to be conducted or promoted in Florida: | Besidential |
| <u> Loons</u> | | * |
| | Signature of a member or an authorized representative of a | |

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

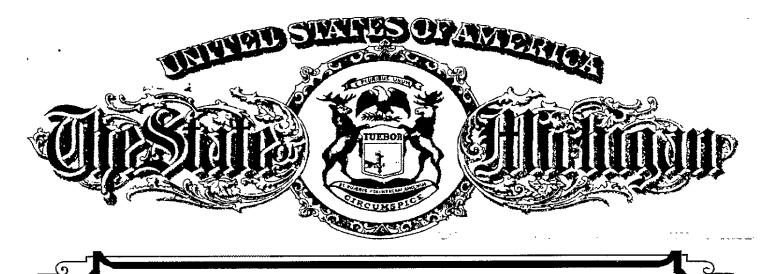
PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

| 1. The name of the Limited Liability Company is: | |
|--|-----------------------------------|
| MOCHESTER BUSINESS GROUP, LLC | |
| 2. The name and the Florida street address of the registered agent and office are: | |
| Miguel Coder (Name) | 66 SEP 22 SECRETAL SECRETAL |
| 6193 B Loural Long Florida Street Address (P.O. Box NOT ACCEPTABLE) | 2 AM 8: 2 AM 8: SEE, FLOO |
| Tamarac FL 33319 City/State/Zip | 25 RIDA |

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.

(Signature)

\$ 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

THE ROCHESTER BUSINESS GROUP, LLC

was validly organized on February 23, 2006 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 14th day of September, 2006

Bureau of Commercial Services

,Director