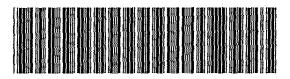
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PICK-UP	☐ WAIT	MAIL		
(B	usiness Entity Na	me)		
(Document Number)				
Certified Copies	Certificate	s of Status		
Special Instructions to	Filing Officer:			

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### TRANSMITTAL LETTER

Division of Corporations				
SUBJECT: AMC WINGS, LLC, a Michigan limited liability company				
(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:				
T. Michael Ansley, Manager				
(Name of Person)				
AMC WINGS, LLC				
(Firm/Company)				
21751 West 11 Mile Road, Suite 208				
(Address)				
Southfield, Michigan 48076				
(City/State and Zip Code)				
For further information concerning this matter, please call:				
T. Michael Ansley at ( 248 ) 223-9160				
(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 \$\Bigcup \$130.00 Filing Fee & Bildo.00 Filing Fee, Certificate  Certificate of Status Certified Copy of Status & 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: AMC WINGS, 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) Perpetual (Duration: Year limited liability company will cease to exist or "perpetual") 6. Not applicable (Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability) 315South Edison, Apartment 6, Tampa, Florida 33606 (Street Address of Principal Office) 8. If limited liability company is a manager-managed company, check here X 9. The name and usual business addresses of the managing members or managers are as follow T. Michael Ansley, 21751 West 11 Mile Road, Southfield, MI 48076 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: \_\_\_ multi-member limited liability company Х 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.)

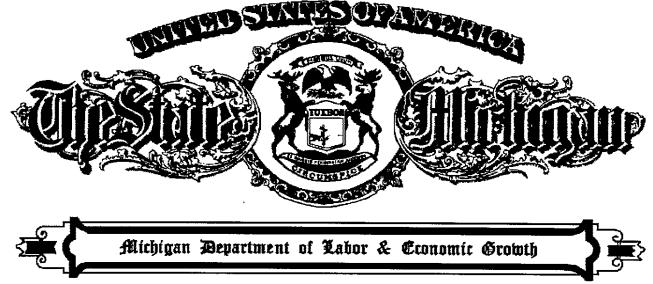
Typed or printed name of signee

T. Michael Ansley, Manager

## 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 Lin	nited Liability Compa	any is:	
AMC WINGS, LLC			
		Programme Control of the Control of	<u> </u>
2. The name and the F	lorida street address o	of the registered agent and office are:	
Mark (	C. Ansley		
		(Name)	<del></del>
<del>315-S</del>	outh Edison, Apart	TAUL O. O. G. HILFY	UNIT #8310
	Florida Street Addi	ress (P.O. Box <u>NOT</u> ACCEPTABLE)	
Tamp	a, Florida <del>33606</del> <i>3</i>		
<del></del>		FL City/State/Zip	<del></del>
liability company at the agent and agree to act i relating to the proper a	place designated in the name of the name o	o accept service of process for the above is certificate, I hereby accept the appoin ier agree to comply with the provisions nce of my duties, and I am familiar with as provided for in Chapter 608, Florida	ntment as registered of all statutes and accept the
×//////////	les /	Mark C. Ansley, Resident Agent	
(S	ignature) \$ 100.00	Filing Fee for Application	FILED PREB 21 PM 3 SECKCHARSEE, FI
	\$ 25.00	Designation of Registered Agent	3: 2: OR
	\$ 30.00	Certificate of Status (optional)	DA. O



Lansing, Michigan

This is to Certify That

#### AMC WINGS, LLC

was validly organized on November 15, 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.

Sent by Facsimile Transmission 910218 In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 21st day of February, 2007

Bureau of Commercial Services

.Director