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A. LUNT

APR - 8 2008

EXAMINER

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04/07/08-01052-019 -160.00

SECRETARY OF STATE

COVER LETTER

Division of Corporations				
SUBJECT: Technology in a box LLC				
(Name of Limit	ted Liability Company)			
The enclosed "Application by Foreign Limited Liab Florida," Certificate of Existence, and check are sull liability company to transact business in Florida				
Please return all correspondence concerning this ma	atter to the following:			
Lisa McCarthy				
(Nar	ne of Person)			
Technology in a box LLC		SEC	2008	-
(Fire	n/Company)	RETA HAN	APR	
39300 West Twelve Mile Rd	., Suite 100	ARY OF	רו :וו לא 1 - אמע ממני	FILED
((Address)	OF STAT	=	D
Farmington Hills, Michigan 4	l8331-2989	A A A	Ē	
. (City/Sta	ite and Zip Code)			
For further information concerning this matter, plea	ase call:			
Lisa McCarthy	_at (248) 579-0969_x09			
(Name of Person)	(Area Code & Daytime Telepho	ne Nun	nber)	
MAILING ADDRESS:	STREET ADDRESS:			
Division of Corporations	Division of Corporations			
P.O. Box 6327	Clifton Building 2661 Executive Center Circle			
Tallahassee, FL 32314	Tallahassee, FL 32301			
Enclosed is a check for the following amount: \$\Begin{array}{c} \\$125.00 \text{ Filing Fee} & \Begin{array}{c} \\$130.00 \text{ Filing Fee} & \text{Certificate of \$\Section{array}{c} \} \end{array}\$	\$155.00 Filing Fee & \$160.00 F			icate fied 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:

Technology In A Roy II C	STATE OF FLORIDA:
1. Technology In A Box, LLC (Name of Foreign Limited Liability Company; must inclu	de "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose consent of the managers or managing members adopting the alter Company," "L.L.C.," "LLC.")	se of transacting business in Florida and attach a copy of the writternate name. The alternate name must include "Limited Liability
_{2.} Wisconsin	20-8736145
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
	perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6. 04/01/2008	
(Date first transacted business in Flo (See sections 608.501 & 608.502 F.S.	to determine penalty liability)
7. 39300 West Twelve Mile Rd., Suite 10	O ALLA
Farmington Hills, Michigan 48331-2989	of Principal Office) company, check here
(Street Address	of Principal Office)
8. If limited liability company is a manager-managed	company, check here 🗸 💆 💆
9. The name and usual business addresses of the mana	aging members or managers are as follows:
	McElroy, Amy Vetter, Andrew Abrams,
39300 West Twelve Mile Rd., Suite 10	
Farmington Hills, Michigan 48331-2989	9
10. Attached is an original certificate of existence, no more than 90 of the jurisdiction under the law of which it is organized. (A photocopy translation of the certificate under oath of the translator must be sub-	
11. Nature of business or purposes to be conducted or	promoted in Florida:
Computer and IT consulting services	
Signature of a member or an au (In accordance with section 608.408(3), F. an affirmation under the penalties of perio Lisa McCarthy	thorized representative of a member, .S., the execution of this document constitutes ary that the facts stated herein are true.)

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.

2008 APR -7 A II	FILED
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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)

RECEIVED

OCT 1 6 2007

MI BEPT. OF LABOR AND ECONOMIC GROWTH BUREAU OF COMMERCIAL SERVICES

United States of America State of Wisconsin

DEPARTMENT OF FINANCIAL INSTITUTIONS

Division of Corporate & Consumer Services



To All to Whom These Presents Shall Come, Greeting:

I, RAY ALLEN, Deputy Administrator, Division of Corporate & Consumer Services, Department of Financial Institutions, do hereby certify that

TECHNOLOGY IN A BOX, LLC

is a domestic corporation or a domestic limited liability company organized under the laws of this state and that its date of incorporation or organization is March 29, 2007.

I further certify that said corporation or limited liability company has not yet completed its initial report year and, accordingly, has not yet filed an annual report under ss. 180.1622, 180.1921, 181.1622 or 183.0120 Wis. Stats., and that said corporation or limited liability company has not filed articles of dissolution.



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the official seal of the Department on October 12, 2007.

RAY ALLEN, Deputy Administrator
Division Of Corporate & Consumer Services
Department of Financial Institutions

Effective July 1, 1996, the Department of Financial Institutions assumed the functions previously performed by the Corporations Division of the Secretary of State and is the successor custodian of corporate records formerly held by the Secretary of State.

DFI/Corp/33

To validate the authenticity of this certificate

Visit this web address: http://www.wdfi.org/apps/ccs/verify/

Enter this code:

44984-84D864A7

Wisconsin Department of Financial Institutions

Strengthening Wisconsin's Financial Future

Verify Certificate of Status

Please enter authenticity code

44984-84D864A7

Submit

Certificate Information

Organization TECHNOLOGY IN A BOX, LLC Name:

Purchase 10/12/2007 11:56:37 AM **Date:**

Certificate is a domestic corporation or a **Text:** domestic limited liability company organized under the laws of this state and that its date of incorporation or organization is March 29, 2007.

I further certify that said corporation or limited liability company has not yet completed its initial report year and, accordingly, has not yet filed an annual report under ss. 180.1622, 180.1921, 181.1622 or 183.0120 Wis. Stats., and that said corporation or limited liability company has not filed articles of dissolution.

Help

The authenticity code can be found at the bottom of the certificate.