Florida Department of State

Division of Corporations Public Access System

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Division of Corporations
Fax Number : (850)617-6383

Account Name : CSH SERVICES, LLC

Account Number : 120070000160 Phone

Fax Number

: (800)494-3124 er : (561)455-9885

LORIDA/FOREIGN LIMITED LIABILITY CO.

IKAZ PROPERTIES, LLC

Certificate of Status	0
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A. LUNT EXAMINER

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4.08000/8/033 · 3
APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

COMPLIANCE WITH SECT MITED LIABILITY COMPANY	TON (01503, FLORIDA STATUTES, TO TRANSACT BUSINESS IN THE S	, THE FOLDOWING IS SOME TATE OF FLORIDA:	mij ed io k	ecenter.	in row
IKAZ Properties,	LLC				
(Name of Foreign Limit	ed Liability Company; must include	"Limited Liability Company	," "L.L.C.," o	"LLC."	')
nsent of the managers or man mpany," "L.L.C.," "LLC.")	mate name adopted for the purpose aging members adopting the altern	of transacting business in Flo ate name. The alternate name	rida and attact must include	n a copy 'Limited	of the wr.
Michigan	3.				
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Stuart, Florida 3	4997		A	Ē	_
	(Street Address of	Principal Office)			
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H-0800018/033·3

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.

·		
Limited Liability Company is:		
es, LLC		
the alternate name to be used in the state of Florida is:		
pe Florida street address of the registered agent and office a	me: \SEC	
anya Lewis	AH.	
(Name)		Company of the last
198 SE Summit Trail	[⁷]	m
Florida Street Address (P.O. Box NOT ACCEPTABLE)	(L)	O
tuart, Florida 34997	15 H	
City/State/Zip		
the place designated in this certificate, I hereby accept the a act in this capacity. I further agree to comply with the proviser and complete performance of my duties, and I am familiar	ppointment as r ions of all statu with and accep	egistered tes
	es, the alternate name to be used in the state of Florida Is: the Florida street address of the registered agent and office a starya Lewis (Name) 198 SE Summit Trail Florida Street Address (P.O. Box NOT ACCEPTABLE) that, Florida 34997 City/State/Zip (as registered agent and to accept service of process for the action place designated in this certificate, I hereby accept the act in this capacity. I further agree to comply with the provision and complete performance of my duties, and I am familiar astion as registered agent as provided for in Chapter 608, Florida accept agent as provided for in Chapter 608, Florida accept agent as provided for in Chapter 608, Florida accept accept accept accept as provided for in Chapter 608, Florida accept ac	the alternate name to be used in the state of Florida is: The Florida street address of the registered agent and office are: The Florida street address of the registered agent and office are: The Florida Street address (P.O. Box NOT ACCEPTABLE) The Florida 34997 The Plorida 34997 The Florida 34997 The Plorida State of Plorida 34997 The Plorida 34997 The Plorida 34997 The Plorida 34997 The Plorida 349



Lansing, Michigan

This is to Certify That

IKAZ PROPERTIES, L.L.C.

was validly organized on March 28, 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 962861 In testimony whereof, I have hereunto set my hand, in the City of Lensing, this 25th day of July, 2008

Bureau of Commercial Services

,Director