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SECRETARY OF STATE

D. BRUCE

MAY 17 2010

**EXAMINER** 

#### COVER LETTER

Registration Section

TO:

Divisio	n of Corporations						
SUBJECT:		og Bay Mitio		y			
	pplication by Foreign Limited Li heck are submitted to register the						
Please return all	correspondence concerning this t	matter to the follo	wing:				
		Shirley					
		Name of	Person				
Landon Companies Firm/Company							
	21 Ea	ast Long Lake Addi		100			
	Bloor	nfield Hills	MI 48	304	<del></del>		
		City/State and	a Zip Code				
-		unet@landone (to be used for fu					
For further infor	mation concerning this matter, pla			,		10 #	<b>CSM</b> (marry
	Shirley Brunet	at (	248)_	642-0190 EXT 1	325	H	-
	Name of Person	Area Code	& Daytime Tele	ephone Number	33SC	£	
Division Registra P.O. Bo	NG ADDRESS: n of Corporations ation Section ix 6327 ssee, FL 32314	STREET AD Division of C Registration S Clifton Buildi 2661 Executiv Tallahassee, F	orporations Section ng ve Center Circle		OF STATE S. FLORIDA	AM El: 42	
Enclosed is a	check for the following amo	ount:					
<b>✓</b> \$125	.00 Filing Fee \$130.00 Fili Certificate		3155.00 Filing Fe Certified C				

### 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.	(Name of Foreign Limited Liability Company; must include	gation, LLC "Limited Liability Company," "L.L.C.," or "LLC.")
ço	name unavailable, enter alternate name adopted for the purpose of name of the managers or managing members adopting the alternate ompany," "L.L.C," "LLC.")	f transacting business in Florida and attach a copy of the writte e name. The alternate name must include "Limited Liability
2.	Alaska 3	27-1995662
	Alaska (Jurisdiction under the law of which foreign limited liability company is organized)  3.	27-1995662 (FEI number, if applicable)
4.	02/25/2010 5	Perpetual
	(Date of Organization)	Perpetual  (Duration: Year limited liability company will cease to exist or "perpetual")
6.		
	(Date first transacted business in Florida (See sections 608.501 & 608.502 F.S. to	a, if prior to registration.) determine penalty liability)
7.	21 East Long Lake Road, Suite 100	
	Bloomfield Hills MI 48304	
	(Street Address of P	Pm -
8.	If limited liability company is a manager-managed con	mpany, check here
9.	The name and usual business addresses of the managing	>
	The name and usual business addresses of the managing Daniel J. Aronoff, Trustee of the Daniel Joseph	Aronoff Descendants Trust
		S S S S
	, <u>, , , , , , , , , , , , , , , , , , </u>	# <b>2</b>
the	Attached is an original certificate of existence, no more than 90 days jurisdiction under the law of which it is organized. (A photocopy is an assistance of the certificate under eath of the translator must be submitted.	not acceptable. If the certificate is in a foreign language, a
11	. Nature of business or purposes to be conducted or pro	omoted in Florida: Non residential
	property manag	gement.
	Signature of a member or an author (In accordance with section 608.408(3), F.S., t an affirmation under the penalties of perjury t	he execution of this document constitutes
	_ LANIE! J.	FRONOFF
	Typed or printed nat	me 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 Limited Liability Company is:			
Bullfrog Bay Mitigation, LLC			
If unavailable, the alternate to be used in the state of Florida is:			
2. The name and the Florida street address of the registered agent and office are:	TALLAH	10 MAY I	ğ y
Janet Aronoff (Name)			
626 Gulf Shore Blvd. S  Florida Street Address (P.O. Box NOT ACCEPTABLE)	E STATE	∰: <b>†</b> 2	Ü
Naples FL, 34102 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.

(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

Alaska Entity # 126769

## State of Alaska Department of Commerce, Community, and Economic Development

# CERTIFICATE OF GOOD STANDING

THE UNDERSIGNED, as Commissioner of Commerce, Community, and Economic Development of the State of Alaska, and custodian of corporation records for said state, hereby certifies that

#### **BULLFROG BAY MITIGATION, LLC**

on the 25th day of February, 2010 filed in this office its Articles of Organization for a Limited Liability Company organized under the laws of this state.

I FURTHER CERTIFY that said Limited Liability Company is in good standing, having fully complied with all the requirements of this office.

No information is available in this office on the financial condition, business activity or practices of this corporation.



IN TESTIMONY WHEREOF, I execute this certificate and affix the Great Scal of the State of Alaska on the 13th day of May, 2010.

Amil notti

Emil Notti Commissioner

Certification Number: 417625-1

Verify this certificate online at https://myalaska.state.ak.us/business/soskb/verify.asp