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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

☐ PICK-UP

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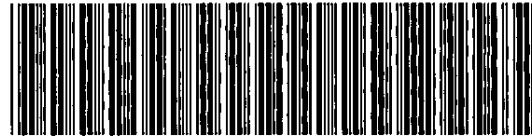
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2014 APR -8 AM 11:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APR 10 2013

T. HAMPTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Versa Manager, 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:

Clifford J. Dovitz

Name of Person

Versa Real Estate

Firm/Company

25900 West Eleven Mile Road, Suite 250

Address

Southfield, MI 48034

City/State and Zip Code

cliff@versacos.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Todd A. Wyett

Name of Contact Person

at (248) 352-2454

Area Code

Daytime Telephone Number

MAILING ADDRESS:

Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy

☐ \$160.00 Filing Fee, Certificate
of Status & Certified Copy

Dovitz Law Offices
Attorneys at Law

Clifford J. Dovitz, PLLC

dovitzlaw.com

March 11, 2014

Florida Department of State
Division of Corporations – Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: Intelliflex VH, LLC - Entity

To Whom It May Concern:

Enclosed are:

- Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida for Intelliflex VH, LLC (original and one (1) copy);
- Certificate of Articles of Organization
- Our check in the amount of \$125.00 for the filing fees.

Please process the enclosed and return time-stamped copies to me.

Please contact me if you have any questions or comments or if I can be of further assistance.

Sincerely,

DOVITZ LAW OFFICES


By: Clifford J. Dovitz
Cliff.dovitz@dovitzlaw.com

CJD/eg

Enclosures

cc: Client – via email – w/enclosures

Main Office: 25900 West Eleven Mile Road • Suite 250 • Southfield, Michigan 48034
Bloomfield Hills Office: 1750 South Telegraph Road • Suite 106 • Bloomfield Hills, Michigan 48302
Telephone: 248.758.2141 • Facsimile: 248.996.1711



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 18, 2014

CLIFFORD J. DOVITZ
25900 WEST ELEVEN MILE ROAD, SUITE 250
SOUTHFIELD, MI 48034

SUBJECT: VERSA MANAGER, LLC
Ref. Number: W14000017235

We have received your document for VERSA MANAGER, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

PAGE 1 of the Application was not enclosed. I am enclosing that page. I have also retained the Good Standing certificate.

The registered agent must sign accepting the designation.

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) 245-6051.

Neysa Culligan
Regulatory Specialist II

Letter Number: 214A00005802

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO
TRANSACTION BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A
FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:

1. **Versa Manager, LLC**

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

Versa Manager - Florida, LLC

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. **Michigan**

(Jurisdiction under the law of which foreign limited liability company is organized)

3. _____

(FEI number, if applicable)

4. _____

(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. **25900 West Eleven Mile Road, Suite 250****Southfield, MI 48034**

(Street Address of Principal Office)

6. **25900 West Eleven Mile Road, Suite 2050****Southfield, MI 48034**

(Mailing Address)

7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Todd A. Wyett - mgr

Steven Robinson - mgr

8. 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)

Signature of an authorized person

(In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Todd A. Wyett

Typed or printed name of signer

FILED
2014 APR -8 AM 11:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), 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:

Versa Manager, LLC

If unavailable, the alternate to be used in the state of Florida is:

Versa Manager - Florida, LLC

2. The name and the Florida street address of the registered agent and office are:

Leopold Korn, PA

(Name)

20801 Biscayne Boulevard, Suite 501

Florida Street Address (P.O. Box NOT ACCEPTABLE)

Aventure

33180

FL

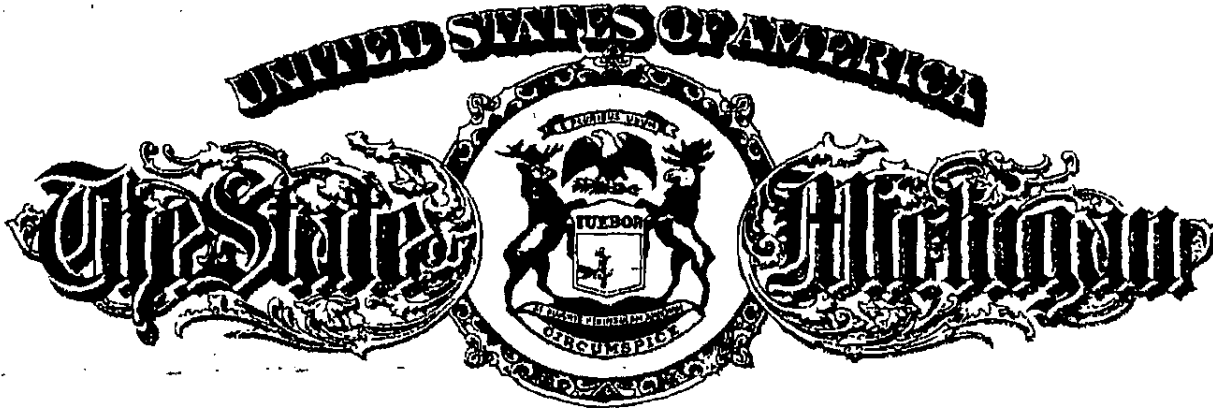
City/State/Zip

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 605, 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)

FILED
2014 APR -8 AM 11:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Department of Licensing and Regulatory Affairs

Lansing, Michigan

This is to Certify That

VERSA MANAGER, LLC

was validly organized on June 4, 2008 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
1181576

In testimony whereof, I have hereunto set my hand,
in the City of Lansing, this 11th day of December, 2013

Alan J. Schefke, Director
Corporations, Securities & Commercial Licensing Bureau