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J. HARRIS

#### **COVER LETTER**

TO:		átion Section n of Corporations					
cupu		eaf Holding, LLC					
SUBJE	ECT:		Name of Limit	ted Liability Company	· · · · · · · · · · · · · · · · · · ·	<del></del>	
		pplication by Foreign Limited neck are submitted to register t					
Please	return all	correspondence concerning thi	s matter to th	e following:			
		Heidi Uuranniemi					
			1	Name of Person	·		
		Heidi H. Uuranniemi, P.A.					
	Firm/Company						
		7634 NW 6th Ave.					
	Address						
		Boca Raton, FL 33487					
	City/State and Zip Code						
		heidi522@hotmail.com	1				
		E-mail add	lress: (to be us	ed for future annual rep	ort notification)	<del></del>	
For fur	ther infor	mation concerning this matter,	please call:				
	Heidi	Uuranniemi		561	994-0280		
		Name of Contact Pers	on	Area Code	Daytime Telephone Num	nber	
	Divisio Registr P.O. Bo	NG ADDRESS: n of Corporations ation Section ox 6327 ssee, FL 32314	Divisi Regist Cliftor 2661 I	cet Address: on of Corporations ration Section n Building Executive Center Circ assee, FL 32301	cle		
Enclo			mount: Filing Fee & te of Status	■ \$155.00 Filing Certified Cop			

#### APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605 0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: Leaf Holding, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "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.") New York (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 24123 Greenfield, Suite 304 5. Southfield, MI 48075 (Street Address of Principal Office) 24123 Greenfield, Suite 304 6. Southfield, MI 48075 (Mailing Address) 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Arto Kalevi Autio, managing member Eero Lehti, manager 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.)

Arto Kaley Autio
Typed or printed name of signee

### 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.

The name of the Limited Liability Company is:  Leaf Holding, LLC						
If unavailable, the alternate to	be used in the state of Florida is:					
2. The name and the Florida  Heidi Uurar	street address of the registered agent and office are:	<u> </u>				
	(Name)					
7634 NW 6	· · ·	JUN 16 1				
F	Florida Street Address (P.O. Box NOT ACCEPTABLE)					
Boca Rator	33487 FL	AMII: 54				
	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.

Characti Ulli
(Signature)

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

## State of New York Department of State } ss:

I hereby certify, that LEAF HOLDING, LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 04/14/2014, and that the Limited Liability Company is existing so far as shown by the records of the Department.



WITNESS my hand and the official seal of the Department of State at the City of Albany, this 30th day of May two thousand and fourteen.

Combiny Scardina

Executive Deputy Secretary of State