M15000001313

(Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL
(City/State/Zip/Phone #)
<u>_</u>
DECK LID DWAIT DWAIL
LI FION-OF MAIN MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer: R. A. SISN WIS 79391
(2.17)



300278660833

11/02/15--01037--005 **125.00

2015 NOV 16 P 2: 39
SECRETARY OF STATE
SECRETARY OF STATE

NOV 1 7 2015

8 MASON



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 3, 2015

HEATHER ZACUR 24330 ANN ARBOR TRAIL DEARBORN HEIGHTS, MI 48127

SUBJECT: ZACUR HOLDINGS LLC

Ref. Number: W15000072391

We have received your document for ZACUR HOLDINGS 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):

The registered agent must sign accepting the designation.

You may comply with this request via fax. Please fax correction(s) to the attention of the undersigned examiner at 850-245-6030.

Please return 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.

Stacey M Mason Regulatory Specialist II

Letter Number: 015A00023231

COVER LETTER

TO:	Registration Section Division of Corporations			
SUBJE	ZACUR HOLDINGS LLC			
	Name of Limited Liability Company			
The end Existen	osed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of and check are submitted to register the above referenced foreign limited liability company to transact business in Florida			
Please	turn all correspondence concerning this matter to the following:			
	HEATHER ZACUR			
	Name of Person			
	Firm/Company			
24330 ANN ARBOR TRAIL				
	Address			
	DEARBORN HEIGHTS, MI 48127			
	City/State and Zip Code			
	FRONTDESK@DELPHITAX.COM			
	E-mail address: (to be used for future annual report notification)			
For furt	er information concerning this matter, please call:			
	REDA AL-SHAER 313 359-0500			
	Name of Contact Person 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			
Enclose	is a check for the following amount: \$\Bigsis \$125.00\$ Filing Fee \$\Bigsis \$130.00\$ Filing Fee & \$\Bigsis \$155.00\$ Filing Fee & \$\Bigsis \$160.00\$ Filing Fee, Certificate of Status & Certified Copy \$\Bigsis \$125.00\$ Filing Fee & \$\Bigsis \$160.00\$ Filing Fee, Certificate of Status & Certified Copy			

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

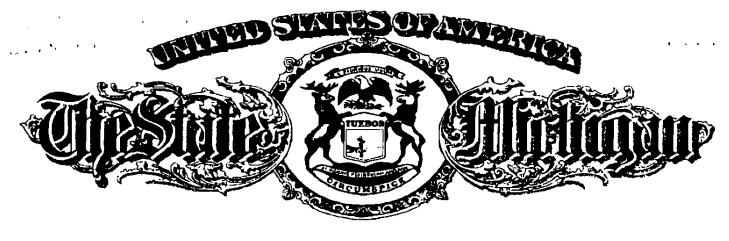
IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Liability Company," "L.L.C,	Iternate name adopted for the purpose of transacting or "LLC.")	business in Florida. The altern	ate name m	ust inclu	ude "Limited
MICHIGAN	_{3.} 46-096	3001			
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if app	licable)		
I.					
	(Date first transacted business in Florida, if (See sections 605.0904 & 605.0905, F.S. to de	prior to registration.)			
2180 ALTON ROAD	.,,	· · · · · · · · · · · · · · · · · · ·			
MIAMI BEACH, FL 3	3140				
	(Street Address of Principal Office)			20	
24330 ANN ARBOR T	RAIL		F-9	2015 N	T
DEARBORN HEIGHT	S, MI 48127		ASS.	S	Discrete aging same
	(Mailing Address)		ريدي ڪ	$\bar{\sigma}$	Š
. Name and street addres	ss of Florida registered agent: (P.O. Box NOT)	acceptable)	70	ט־	
Name:	HEATHER ZACUR	• ,	STATI	?	O
Office Address:	2180 ALTON ROAD	-	DE T	0.11	
Office Address.	MIAMI BEACH	33140			
	(City)	, Florida 33140 (Zip co	de)		
	, , ,	` 1	,		
laving been named as re	tance: gistered agent and to accept service of process tion, I hereby accept the appointment as regist	for the above stated limite ered agent and agree to ac	d liability (t in this ca	compan pacity.	ny at the pla I further a
aving been named as re esignated in this applical complywith the provision	gistered agent and to accept service of process tion, I hereby accept the appointment as regist ons of all statutes relative to the proper and con	ered agent and agree to ac	t in this ca	pacity.	I further a
laving been named as re esignated in this applical complywith the provision	gistered agent and to accept service of process tion, I hereby accept the appointment as regist	ered agent and agree to ac	t in this ca	pacity.	I further a
laving been named as re esignated in this applical complywith the provision	gistered agent and to accept service of process tion, I hereby accept the appointment as registo ons of all statutes relative to the proper and con ny position as registered agent.	ered agent and agree to ac implete performance of my	t in this ca	pacity.	I further a
Iaving been named as re esignated in this applical o complywith the provision ccept the obligations of n	gistered agent and to accept service of process tion, I hereby accept the appointment as registons of all statutes relative to the proper and conny position as registered agent. (Registered agent's sign	ered agent and agree to ac implete performance of my acture)	t in this ca	pacity.	I further a
Taving been named as relesignated in this applical complywith the provision comply with the provision of name, title or capa	gistered agent and to accept service of process tion, I hereby accept the appointment as registerns of all statutes relative to the proper and con my position as registered agent. (Registered agent's sign actity and address of the person(s) who has/have	ered agent and agree to ac implete performance of my nature) authority to manage is/are:	t in this ca	pacity.	I further a
Iaving been named as re- lesignated in this applical o complywith the provision occept the obligations of n B. The name, title or capa	gistered agent and to accept service of process tion, I hereby accept the appointment as registons of all statutes relative to the proper and conny position as registered agent. (Registered agent's sign	ered agent and agree to ac implete performance of my nature) authority to manage is/are:	t in this ca	pacity.	I further a
esignated in this applicate complywith the provision complywith the provision of the control of	gistered agent and to accept service of process tion, I hereby accept the appointment as registerns of all statutes relative to the proper and con my position as registered agent. (Registered agent's sign actity and address of the person(s) who has/have	ered agent and agree to ac implete performance of my nature) authority to manage is/are:	t in this ca	pacity.	I further a
Iaving been named as re- lesignated in this applical o complywith the provision occept the obligations of n B. The name, title or capa	gistered agent and to accept service of process tion, I hereby accept the appointment as registerns of all statutes relative to the proper and con my position as registered agent. (Registered agent's sign actity and address of the person(s) who has/have	ered agent and agree to ac implete performance of my nature) authority to manage is/are:	t in this ca	pacity.	I further a
Javing been named as re- lesignated in this applical to complywith the provision occept the obligations of n 3. The name, title or capa HEATHER ZACUR, SOL	gistered agent and to accept service of process tion, I hereby accept the appointment as registered sons of all statutes relative to the proper and con my position as registered agent. (Registered agent's sign acity and address of the person(s) who has/have at E MEMBER, 2180 ALTON ROAD, MIAMI B	ered agent and agree to acmplete performance of my hature) authority to manage is/are: BEACH, FL 33140	t in this ca	pacity.	I further a familiar wii
Idving been named as re- lesignated in this application complywith the provision complywith the provision country the obligations of a second the name, title or capa deather than the law of the law	gistered agent and to accept service of process tion, I hereby accept the appointment as registions of all statutes relative to the proper and commy position as registered agent. (Registered agent's sign acity and address of the person(s) who has/have at EMEMBER, 2180 ALTON ROAD, MIAMI But of existence, no more than 90 days old, duly aut of which it is organized. (If the certificate is in a	ered agent and agree to acmplete performance of my hature) authority to manage is/are: BEACH, FL 33140 thenticated by the official h	t in this ca	pacity. d I am j	I further a familiar wis
Javing been named as re- designated in this application complywith the provision occept the obligations of a second secon	gistered agent and to accept service of process tion, I hereby accept the appointment as registions of all statutes relative to the proper and commy position as registered agent. (Registered agent's sign acity and address of the person(s) who has/have at EMEMBER, 2180 ALTON ROAD, MIAMI But of existence, no more than 90 days old, duly aut of which it is organized. (If the certificate is in a	ered agent and agree to acmplete performance of my hature) authority to manage is/are: BEACH, FL 33140 thenticated by the official h	t in this ca	pacity. d I am j	I further a familiar wis

Typed or printed name of signee

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

HEATHER ZACUR



Department of Licensing and Regulatory Affairs

Lansing, Michigan

This is to Certify That

ZACUR HOLDINGS LLC

was validly organized on September 12, 2012 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 1352128

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 27th day of October, 2015

Julia Dale, Acting Director

Corporations, Securities & Commercial Licensing Bureau