MIGOOD	<u>001327</u>
(Requestor's Name) (Address)	400282095484
(City/State/Zip/Phone #)	
Business Entity Name)	SUFFICE
(Document Number)	CEIVED
Special Instructions to Filing Officer:	
	IG FEB IT AH 9: 13 SECRETARY OF STATE TALLAHASSEE, FLORIDA
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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

1. A. .

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ACCOUNT NO.	:	I2000000195	
REFERENCE	:	973630 5169741	
AUTHORIZATION	:	Smell & a ma	
COST LIMIT	:	Sprelle nan \$)125.00	
ORDER DATE : January 27, 2016			

- ORDER TIME : 9:32 AM
- ORDER NO. : 973630-075
- CUSTOMER NO: 5169741

FOREIGN FILINGS

NAME: MAVEN DRIVE LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY

 XX
 PLAIN STAMPED COPY

 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER:

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:

L Maven Drive LLC

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

	f name unavailable, enter a ability Company," "L.L.C,	Remate name adopted for the purpose of transacting busin " or "LLC.")	ess in Florida. The alternate name i	nust include "	Limite	đ
2.	Delaware (Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicable)			
4.	Upon filing	(Date first transacted business in Florida, if prior (See sections 605.0904 & 605.0905, F.S. to determine	to registration.) ine penalty liability)			
5,	300 Renaissance Cente	êr				
	Detroit, MI 48265-300			<u>-</u>	دام	
6.	300 Renaissance Cente	(Street Address of Principal Office)		SECRE	e ee B	
	Detroit, MI 48265-300	0	,		-	i i
	· · · · · · · · · · · · · · · · ·	(Mailing Address)		27 27 27 27 27 27 27 27 27 27 27 27 27 2	AM	
7.	Name and street addres	ss of Plorida registered agent: (P.O. Box NOT acce	ptable)	Fo	و	C
	Name:	Corporation Service Company	_	ORI	- w	

Office Address: Tallahassec , Florida 3230) (City) (Zip codc)

Registered agent's acceptance:

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 application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Corporau	on Service So	mpany	Janet Budhu, Asec.	Alce Miea
By:	reter	pr		
		Registered agent's sign	nature)	

- 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/arc:
 - Julia Steyn, Manager Mail Code: 482-C37-D99, 300 Renaissance Center, Detroit, MI 48265-3000

Alain Genouw, Manager - Mail Code: 482-D39-B32, 300 Renaissance Center, Detroit, MI 48265-3000

9. Attached is a 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. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

(A)	Mess	
Sputh	re of an authorized person .	

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.

1201 Hays Street



The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MAVEN DRIVE LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FOURTH DAY OF FEBRUARY, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MAVEN DRIVE LLC" WAS FORMED ON THE TWENTY-SEVENTH DAY OF JANUARY, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.



Authentication: 201780528

Date: 02-04-16

Page 1

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SR# 20160594801 You may verify this certificate online at corp.delaware.gov/authver.shtml