

Mile 0000001486

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

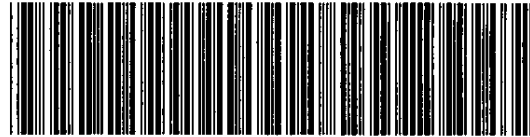
(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2016 FEB 22 P 1:12

FILED

FEB 23 2016
J. BRUCE



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 5, 2016

BARRY CLAY
7066 SE BAY HILL DRIVE
STUART, FL 34997

SUBJECT: PCI LLC
Ref. Number: W16000009184

FILED
2016 FEB 22 P 1:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for PCI 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 name listed in number one of the application must be identical to the name listed in the certificate of existence.

Pursuant to s.605.0902(1)(e), Florida Statutes, the document must contain the name, title or capacity and address of at least one person who has the authority to manage the foreign limited liability company.

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.

Deborah Bruce
Regulatory Specialist II

Letter Number: 516A00002542

COVER LETTER

Registration Section
Division of Corporations

T: PCI LLC
Name of Limited Liability Company

used "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Cer
tificate of Status, and check are submitted to register the above referenced foreign limited liability company to transact business.

Return all correspondence concerning this matter to the following:

Barry Clay
Name of Person

PCI LLC
Firm/Company

7066 SE Bay Hill Drive
Address

Stuart, Florida 34997
City/State and Zip Code

bclay@pci-detroit.com
E-mail address: (to be used for future annual report notification)

For information concerning this matter, please call:

Lorraine Chue at (313) 874-5877
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

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, Cer
tificate of Status & Cer
tified 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.

1. Process Control & Instrumentation, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," or "L.L.C.")

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

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

3. 38-3069266
(FBI number, if applicable)

4. None to date
(Date first transacted business in Florida, if prior to registration.
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability))

5. 840 W. Milwaukee Street
Detroit MI 48202
(Street Address of Principal Office)

6. same
(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: PCI LLC Barry Clay
Office Address: 7066 SE Bay Hill Drive
Stuart, Florida 34997
(City) (Zip code)

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.

Barry Clay
(Registered agent's signature)

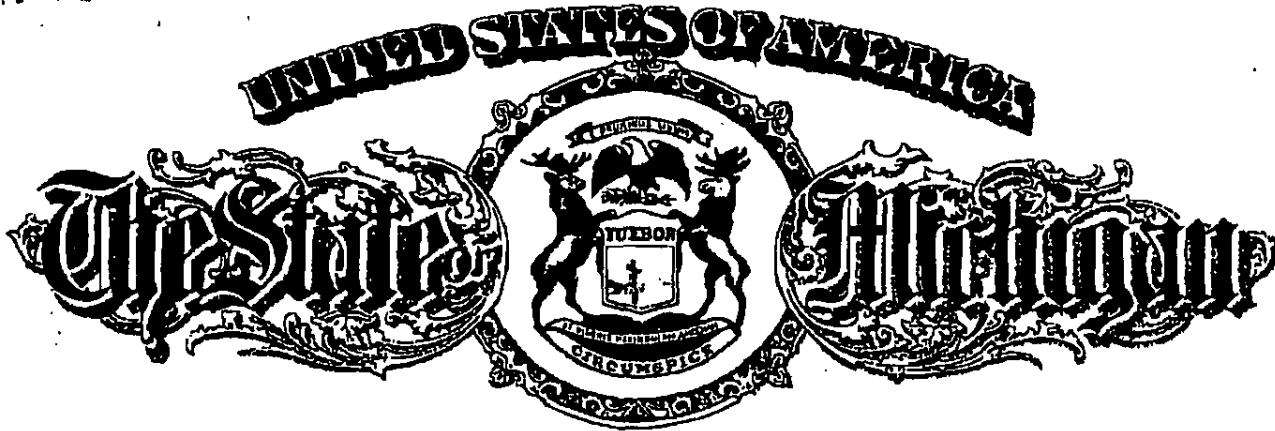
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Barry Clay President 7066 SE Bay Hill Dr. Stuart FL
La Dada Chief Operations Officer 34997
Hassan Ajami General Manager.

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 (the translator must be submitted))

Barry Clay
(Signature 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 furnished in a document to the Department of State constitutes a third degree felony as provided for in s.817.151, F.S.



Department of Licensing and Regulatory Affairs
Lansing, Michigan

This is to Certify That

PROCESS CONTROL & INSTRUMENTATION, LLC

was validly organized on January 30, 2002 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
1365889

*In testimony whereof, I have hereunto set my hand,
in the City of Lansing, this 29th day of January, 2016*

Julia Dale

Julia Dale, Acting Director
Corporations, Securities & Commercial Licensing Bureau