Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number: FCA000000023 Phone : (850)205-8842 Fax Number : (850)878-5368

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

Foreign Limited Liability Company Biotronic National, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
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Electronic Filing Menu

Corporate Filing New 2016

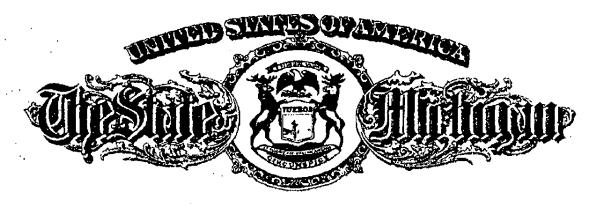
Help

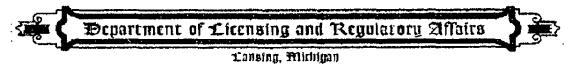
COVER LETTER			
TO:	Registration Section Division of Corporations		
SUBJE	CCT: Biotronic National, LLC		
	Name of Limited Liability Company		
	closed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of ace, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida		
Please	return all correspondence concerning this matter to the following:		
	Hank Containger Name of Person		
	Name of Person		
	BioLanic Notronal, LLC Firm/Company		
	Firm/Company		
	C12 Air Dave		
	812 Avis Drive		
	.,		
	Ann Arbor, MI 48108 City/State and Zip Code		
	City/State and Zip Code		
	hankgretzinger@biotronic.com		
• •	E-mail address: (to be used for future annual report notification)		
For furt	ther information concerning this matter, please call:		
	Hank Griger at 734 545-538-3 Name of Contact Person Area Code Daytime Telephone Number		
	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	ed is a check for the following amount: \$\Begin{align*} \text{\$\frac{1}{2}}\$.00 Filing Fee & \$\Begin{align*} \text{\$\frac{1}{2}}\$.00 Filing Fee & \$\Beta\$ \$\text{\$\frac{1}{2}}\$.160.00 Filing Fee, Certificate Copy \$\text{Certified Copy}\$ 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:

1. Biotronic Nutional, 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 alternational Liability Company, "L.L.C," or "LLC,")	ate name must include	"Limited
2. Michigan (Jurisdiction under the law of which foreign limited liability company is organized) 3. 20-2246906 (FEI number, if applications of the law of which foreign limited liability company is organized)	icable)	
4. Upon Qualification		
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)		
5. 812 Avis Drive, Ann Arbor, MI 48108		
(Street Address of Principal Office)		
6	700	
	राम्चर्गाः राज्यसम्बद्धाः	737
(Mailing Address)	्रह्म 👼	
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	10 N	m
Name: CT Corporation System	A II:	
Office Address: 1200 South Pine Island Road	~~ =_1	
Plantation , Florida 33324		
(City) (Zip coc	ie) '	
Having been named as registered agent and to accept service of process for the above stated limited designated in this application, I hereby accept the appointment as registered agent and agree to act to complywith the provisions of all statutes relative to the proper and complete performance of my accept the obligations of my position as registered agent.	in this capacity. I j duties, and I am far	further agree
By: AL LA Lunce Cornor Michael Seraphin Asst. Secreta	ary	
(Registered agent's signature)		
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Hank bretzinger Manager		
812 Avis Drive		
Ann Arbor, MI48108		
9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official has jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translat of the translator must be submitted) Signature of an authorized person	iving custody of rection of the certificate	ords in the under oath
This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes, I am aware the submitted in a document to the Department of State constitutes a third degree felony as provided for in	at any false informat s.817.155, P.S.	ion
Hank Gretzinger	·	
Typed or printed name of signee		





This is to Certify That

BIOTRONIC NATIONAL, LLC

was validly organized on January 28, 2005 as a Limited Liability Company. Said Limited Liability Company is validly in existence under the laws of this state and has setisfied 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 Faosimile Transmission 1391818

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 17th day of June, 2016

Julia Dale, Director

Corporations, Securities & Commercial Licensing Bureau