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| (Re | questor's Name) | |
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| (Ви | siness Entity Na | me) |
| (Do | ocument Number) | |
| Certified Copies | _ Certificate | s of Status |
| Special Instructions to | Filing Officer: | |
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SECRETARY OF STATE
TALLAMASSEE FLORDA

COVER LETTER

Registration Section Division of Corporations

TO:

| SUBJECT: | Camelot Venture Gr | oup LLC | | | | | |
|-------------------------------|--|---|---|---|---------------------------------|---------------------|--------------------|
| | | Name of | Limited Liability (| Company | | | |
| The enclosed Existence, ar | I "Application by For ad check are submitted | eign Limited Liability Com d to register the above refer | pany for Authoriza enced foreign limit | ation to Transact Business ted liability company to tr | in Florida," (ansact busine | Certific ss in F | cate of Florida |
| Please return | all correspondence c | oncerning this matter to the | following: | | | | |
| | Nicholas Pyett | | | | | | |
| | | N | ame of Person | | | | |
| | Camelot Ventur | re Group LLC | • | , | | | |
| | <u> </u> | F | irm/Company | | | • | |
| | 27725 Stansbur | y Boulevard, Suite 175 | | | | - | • |
| - | , | | Address | | ·· ··· | | 1 |
| | Farmington Hil | ls, MI 48334 | | | TA: | ਡ | |
| | | City/S | state and Zip Code | | TE S | | |
| • | npyett@cameloty | /g.com | | | 第二 | === | 77 |
| | · · · · · · · · · · · · · · · · · · · | E-mail address: (to be use | d for future annual | report notification) | | <u>പ</u> | ij |
| For further in | nformation concerning | g this matter, please call: | | | | ☆ | ب |
| Nic | cholas Pyett | | 248 at (| 741-5121 | Ĩ. | 30 | |
| <u></u> | Name o | f Contact Person | Area Code | Daytime Telephon | e Number | | |
| Div Reg P.O | ision of Corporations gistration Section Box 6327 lahassee, FL 32314 | · | | STREET ADDRESS: Division of Corporation Registration Section Clifton Building 2661 Executive Center of Tallahassee, FL 32301 | , | | |
| | a check for the follow \$125.00 Filing Fee | ing amount: ☐ \$130.00 Filing Fee & Certificate of Status | □ \$155.00 Filin Certified Copy | | filing Fee, Ce Certified Cop | | e |
| | | | | , , , , , , , , , , , , , , , , , , , | | | ٠ |

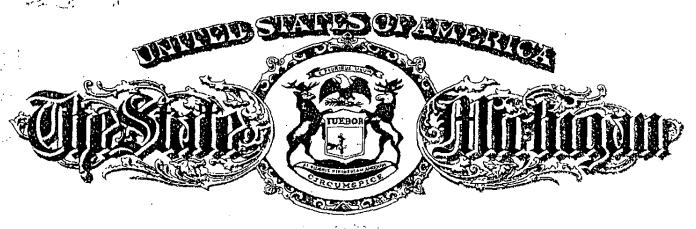
APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605,0902, FLORIDA STATUTES, THE FULLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS. IN THE STATE OF FLORIDA:

| name unavanable, enter a bility Company," "L.L.C, | Iternate name adopted for the purpor " or "LLC.") | se of transacting business in Florida. | . The afternate name | e must includ | e "Lim | iited |
|--|--|--|---|---------------|----------|--|
| Michigan | | 3. 26-3390928 | | | | |
| Jurisdiction under the law company is organized) | of which foreign limited liability | (FEI num | nber, if applicable) | | | - |
| 04/11/2016 | | • | | - | | |
| | (Date first transacted busin | ness in Florida, if prior to registration 5.0905, F.S. to determine penalty liab | L) Bility) | | | |
| 27725 Stansbury Boul | | | omi, j | | | |
| | · · · · · · · · · · · · · · · · · · · | | | **4 | | |
| Farmington Hills, MI | | Principal Office) | | ESS SEC | □ | |
| Same | | | | | يخ | ************************************** |
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| · · · · · · · · · · · · · · · · · · · | (Mailine | Address) | | 7-4-4 110 | വ | |
| | | | | | 3 | Ü |
| Name and street addres | ss of Florida registered agent: (I | P.O. Box NOT acceptable) | | | Ŵ | |
| Name: | David Katzman | | | 野馬 | 05 | |
| Office Address: | 1005 Grand Isle Terrace | , | | | | |
| Office Aggress; | | <u></u> | | | | |
| Office Address; | Palm Beach Gardens | Florida | 33418 | | | |
| gistered agent's accep | (City) | , Florida | • | | . nd 41c | |
| gistered agent's accep ving been named as re ignated in this applica complywith the provisi | (City) tance: gistered agent and to accept se tion, I hereby accept the appoir ons of all statutes relative to the my position as registered agent. | rvice of process for the above sta nament as registered agent and a proper and complete performan | ited limited liabili gree to act in this | capacity. 1 | I furth | ier agr |
| gistered agent's acception of the proving been named as resignated in this applica complywith the provision of the obligations of the obligations. | (City) tance: gistered agent and to accept se tion, I hereby accept the appoin ons of all statutes relative to the my position as registered agent. (Regi: | rvice of process for the above stantment as registered agent and age proper and complete performant stered agent's signature) | nted limited liabili gree to act in this nce of my duties, | capacity. 1 | I furth | ier agr |
| gistered agent's accepying been named as reignated in this applicacomplywith the provision of the obligations of the name, title or capa | (City) tance: gistered agent and to accept section, I hereby accept the appoint ons of all statutes relative to the my position as registered agent. (Registered and address of the person(sective) | rvice of process for the above standard as registered agent and as proper and complete performant as standard as proper and complete performant as standard agent's signature) | nted limited liabili gree to act in this nce of my duties, nge is/are: | capacity. 1 | I furth | ier agr |
| gistered agent's accepying been named as reignated in this applicacomplywith the provision of the obligations of the name, title or capa | (City) tance: gistered agent and to accept section, I hereby accept the appoint ons of all statutes relative to the my position as registered agent. (Registered and address of the person(sective) | rvice of process for the above stantment as registered agent and age proper and complete performant stered agent's signature) | nted limited liabili gree to act in this nce of my duties, nge is/are: | capacity. 1 | I furth | ier agr |
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| gistered agent's acceptiving been named as resignated in this applica complywith the provision of the obligations of the name, title or capa | (City) tance: gistered agent and to accept section, I hereby accept the appoint ons of all statutes relative to the my position as registered agent. (Reginally and address of the person(sective) | rvice of process for the above standard as registered agent and as proper and complete performant as standard as proper and complete performant as standard agent's signature) | nted limited liabili gree to act in this nce of my duties, nge is/are: | capacity. 1 | I furth | ier agr |

Typed or printed name of signee

David Katzman



Department of Licensing and Regulatory Affairs

Lansing, Michigan

This is to Certify That

CAMELOT VENTURE GROUP, LLC

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 1380527 In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 20th day of April, 2016

Julia Dale, Director

Corporations, Securities & Commercial Licensing Bureau