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COVER LETTER

TO:		ration Section on of Corporation	s					
SUBJE		KEIN INTEGRAT	ED SYSTEMS LLC					
Name of Limited Liability Company								
						nsact Business in Florida," Certificate of company to transact business in Florida		
Please r	eturn all	l correspondence c	oncerning this matter to the	following:				
		LISA RADABA	AUGH					
	Name of Person							
KUKA SYSTEMS NORTH AMERICA LLC								
Firm/Company								
6600 CENTER DRIVE								
Address								
STERLING HEIGHTS, MI 48312								
			City/St	ate and Zip Code				
LISARADABAUGH@KUKALEGAL.COM								
E-mail address: (to be used for future annual report notification)								
For furt	ther info	rmation concernin	g this matter, please call:					
	LISA RADABAUGH		586 at (795-200	795-2000(X4810)			
		Name o	of Contact Person	Area Code	Day	time 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		of Corporations on Section uilding cutive Center Circle			
Enclose		heck for the follow 25.00 Filing Fee	ring amount: ☐ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filir Certified Copy	ng Fee &	■ \$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: SKEIN INTEGRATED SYSTEMS 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 alternate name must include "Limited Liability Company," "L.L.C," or "LLC.") _{2.} MICHIGAN 3. 81-3798359 (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 22500 KEY DRIVE CLINTON TOWNSHIP, MI 48036 (Street Address of Principal Office) 6600 CENTER DRIVE STERLING HEIGHTS, MI 48312 (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) ·C T CORPORATION SYSTEM Name: 1200 SOUTH PINE ISLAND ROAD Office Address: PLANTATION (City) 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 complywith 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. James M. Halpin Assistant Secretary (Registered agent's signature) The name, title or capacity and address of the person(s) who has/have authority to manage is/are: PAUL AMBROS, MANAGER LARRY DRAKE, MANAGER ROBERT RENO, MANAGER 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) 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 submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. Paul Ambros Typed or printed name of signee





This is to Certify That

SKEIN INTEGRATED SYSTEMS LLC

was validly organized on September 9, 2016 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 pertificate 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 1413838

In testimony whereof, I have hereunto set my hand, In the City of Lansing, this 27th day of September, 2016

Julia Dale, Director

us Dale

Corporations, Securities & Commercial Licensing Bureau