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VELMEIR ACQUISITION SERVICES., L.L.C. 5757 West Maple Road, Suite 800 West Bloomfield, MI 48322 (248) 539-7997

ì.

November 14, 2016

Florida Department of State Division of Corporations Registration Section P.O.Box 6327 Tallahassee, Florida 32314

Re: Velmeir Acquisition Services., L.L.C. - Foreign LLC

Florida Department of State:

Enclosed please find the following documents in connection with the registration of Velmeir Acquisition Services, L.L.C., a Michigan Limited Liability Company to transact business in Florida:

- 1. A completed application.
- 2. An original certificate of existence for Velmeir Acquisition Services, L.L.C.
- 3. "Velmeir Co., L.L.C. check no: 1893 in the amount of One Hundred Twenty Five Dollars (\$125.00) made payable to "Florida Department of State" representing the filing fee and designation of registered agent.

Please let me know if you require any additional information.

Best regárds

Susan Goldfinan

Agent for Velmeir Acquisition Services, L.L.C.

COVER LETTER

TO:	Registration Section Division of Corporations					
CHRI	Velmeir Acquisition Services, L.L.C.					
SUBJ		ed Liability Company				
		or Authorization to Transact Business in Florida," Certificate of foreign limited liability company to transact business in Florida				
Please	se return all correspondence concerning this matter to the follow	ving:				
	Susan Goldman					
	Name o	f Person				
	The Velmeir Companies					
	Firm/Company					
	5757 West Maple Road, Suite 800					
	Add	lress				
	West Bloomfield, MI 48322					
	City/State a	nd Zip Code				
	sgoldman@velmeir.com					
	E-mail address: (to be used for t	future annual report notification)				
For fu	further information concerning this matter, please call:					
	Susan Goldman	248 539-7997				
	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				
Enclo		\$155.00 Filing Fee & Status & Certified Copy 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. Velmeir Acquisition Services, L.L.C.

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

Liability Company," "L.L.C,"		e of transacti	ing business in Florida. The alternate name	must includ	e "Limi	tcd
2. Michigan		3. B38	3249	37.15	ಹ	
(Jurisdiction under the law company is organized)	of which foreign limited liability	<u></u>	(FEI number, if applicable)		NON	
4					2	
	(Date first transacted busine (See sections 605,0904 & 605	.0905, F.S. ti	o determine penalty liability)		X	im C)
	1, Suite 800, West Bloomfield, N				1: 45	
	(Street Address of	Principal Off	ice)		S	
6						
5757 W. Maple Road,	Suite 800, West Bloomfield, MI (Mailing		· · · · · · · · · · · · · · · · · · ·			
	, ,	•				
 Name and <u>street addres</u> 	s of Florida registered agent: (P	.O. Box <u>N</u> O	OT acceptable)			
Name:	William A. White		** ***********************************			
Office Address:	566 Hardwood Place					
	Lake Mary		Florida 32746			
D	(City)		, Florida 32746 (Zip code)			
Having been named as re designated in this applicat to complywith the provision	tance: gistered agent and to accept ser tion. I hereby accept the appoin	vice of proc tment as re	(Zip code) ress for the above stated limited liability gistered agent and agree to act in this complete performance of my duties,	capacity	[furth	er agre
Having been named as re designated in this applicat to complywith the provision	tance: gistered agent and to accept ser don, I hereby accept the appoin ons of all statutes relative to the ny position as registered agent.	vice of prod tmen! as re proper and	ress for the above stated limited liabili gistered agent and agree to act in this complete performance of my duties,	capacity	[furth	er agre
Having been named as registering the designated in this applicate to comply with the provision accept the obligations of name, title or capa	tance: gistered agent and to accept ser tion, I hereby accept the appoin ons of all statutes relative to the my position as registered agent. (Regist acity and address of the person(s)	vice of proc tment as re proper and proper and tered agent's	ress for the above stated limited liability gistered agent and agree to act in this complete performance of my duties, a signature)	capacity	[furth	er agri
Having been named as redesignated in this application complywith the provision accept the obligations of name, title or capa Stephen J. Bock, Authoriz	tance: gistered agent and to accept ser tion, I hereby accept the appoin ons of all statutes relative to the my position as registered agent. (Regist scity and address of the person(s)	proper and lered agent's with has/ha	ress for the above stated limited liability gistered agent and agree to act in this complete performance of my duties, a signature) signature) ave authority to manage is/are:	capacity	l furth amilia	er agr · with
Having been named as redesignated in this applicated to complywith the provision accept the obligations of notice the second sec	tance: gistered agent and to accept ser tion, I hereby accept the appoint ons of all statutes relative to the my position as registered agent. (Regist acity and address of the person(s) and representative of existence, no more than 90 day of which it is organized. (If the calbinitted)	proper and lered agent's who has/ha	ress for the above stated limited liability gistered agent and agree to act in this complete performance of my duties, a signature) ave authority to manage is/are: authenticated by the official having curing a foreign language, a translation of the signature	capacity and I am fo	ecords	er agri
designated in this applicate to complywith the provision accept the obligations of notice and the name, title or capa Stephen J. Bock, Authoriz 9. Attached is a certificate	tance: gistered agent and to accept ser tion, I hereby accept the appoint ons of all statutes relative to the my position as registered agent. (Regist acity and address of the person(s) and representative of existence, no more than 90 day of which it is organized. (If the calbinitted)	proper and itered agent's who has/ha	ress for the above stated limited liability gistered agent and agree to act in this complete performance of my duties, a signature) ave authority to manage is/are: authenticated by the official having curing a foreign language, a translation of the signature	capacity and I am fo	ecords	er agr. with

Typed or printed name of signee

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:

f name unavailable, enter al	ternate name adopted for the purpose of transac	cting business in Florida. The alternate name	must inc	lude "I	 .imited
iability Company," "L.L.C,'		Anna Carriero			
Michigan		38249			
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicable)			
	(Date first transacted business in Floric	da, if prior to registration.)			
	(See sections 605.0904 & 605.0905, F.S.			16 NOV 21	
5757 West Maple Road, Suite 800, West Bloomfield, MI 48322					
	(Street Address of Principal O	Office)	<u> </u>	-2	<u></u>
			J. C.	PΗ	TT TT
	Suite 800, West Bloomfield, MI 48322		95 95 20		
	(Mailing Address)			Ę.	
Name and street addres	s of Florida registered agent: (P.O. Box 1	NOT acceptable)	<i>≱.</i> ₹ .		
Name:	William A. White				
Office Address:	566 Hardwood Place				
	Lake Mary	, Florida_32746			
	(City)	(Zip code)	•		
esignated in this applica complywith the provisi	gistered agent and to accept service of pro tion, I hereby accept the appointment as t ons of all statutes relative to the proper an my position as registered agent.	registered agent and agree to act in this	s capacit	y. I fu	rther agi
	(Registered agent	's signature)			
	acity and address of the person(s) who has/	have authority to manage is/are:			
3. The name, title or capa		mave aumorny to manage is are.			
·	•	have authority to manage is are.			
8. The name, title or capa Stephen J. Bock, Authoriz	•	nave authority to manage is are.		-	
•	•	nave authority to manage is are.		-	
•	•	nave authority to manage is are.		-	
Stephen J. Bock, Authoriz	of existence, no more than 90 days old, du of which it is organized. (If the certificate ubmitted)	uly authenticated by the official having c is in a foreign language, a translation of			
Stephen J. Bock, Authorize Stephen J. Bock, Auth	of existence, no more than 90 days old, du of which it is organized. (If the certificate ubmitted)	uly authenticated by the official having c			
Attached is a certificate urisdiction under the law of the translator must be sufficient to the translator must be suffici	of existence, no more than 90 days old, du of which it is organized. (If the certificate ubmitted)	uly authenticated by the official having control is in a foreign language, a translation of norized person ASMI (b), Florida Statutes. I am aware that any	the certi	ficate of	under oa

Typed or printed name of signee



This is to Certify That

VELMEIR ACQUISITION SERVICES, L.L.C.

was validly organized on October 6, 1999 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 1419108

In testimony whereof, I have hereunto set my handing in the City of Lansing, this 2nd day of November, 2016

Julia Dale

Julia Dale, Director Corporations, Securities & Commercial Licensing Bureau

5 NOV 21 PH 1:4