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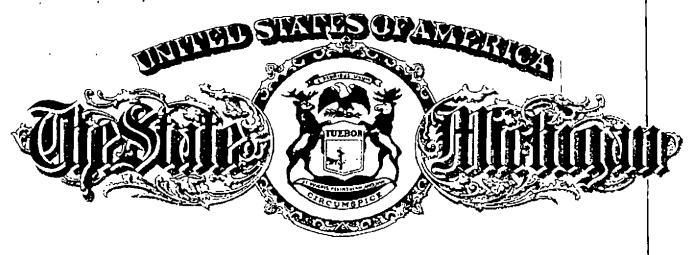
	istration Section ision of Corporation	ns		•		
etib iberr.	Intelligent Instrume	ntation, LLC				
SUBJECT:			Limited Liability (Company	_	
					ansact Business in Florida," Certif y company to transact business in	
Please return	all correspondence	concerning this matter to the	following:			
	Sam J. Saad III					
		N	ame of Person			
	Law Office of	Sam J. Saad III				
		F	imı/Company		<u> </u>	
	2670 Airport-P	ulling Road South				1
		· • -	Address			
	Naples, FL 341	12				
		City/S	tate and Zip Code			
	OfficeManager@	PSaadLegal.com				1
		E-mail address: (to be use	d for future annual	report no	tification)	
For further in	formation concerning	g this matter, please call:				
Jasc	on Sizemore		239	963-16	35	j
	Name o	of Contact Person	Area Code	Day	ytime Telephone Number	
Divi Regi P.O.	ILING ADDRESS: ision of Corporations istration Section Box 6327 ahassee, FL 32314			Division Registrat Clifton B 2661 Exc	F ADDRESS: of Corporations tion Section Building ecutive Center Circle see, FL 32301	
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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 TOTRANSACT BUSINESS. IN THE STATE OF FLORIDA:

	imited Liability Company; must include "Limit	ed Liabilit	y Company," "L.L.C.," or "LLC.")		
name unavailable, enter alternate nar	ne adopted for the purpose of transacting business in Fl	onda. The a	tternate name must include "Limmed Liabil	lity Company," "L.L.	C," or "LLÇ
Michigan		1	474195668		
	ch foreign limited liability company is organized)	٦,	(FEI manbe	r, (f'applicable)	i
·····	(Date first transacted business in Florida, if prior to (See sections 605 0904 & 605,0905, F.S. to determ	o registration nine penalty	iability)		
201 South Division Stre	et, Ste 400	6	201 South Division Street, S	Ste 201	653 1/-3
(Street Address of Pri	memal Office)	· · ·	(Mailing Addre	55)	
Ann Arbor, MI, 48104			Ann Arbor, MI 48104		<u></u>
				,	!
Name and street address	of Florida registered agent: (P.O. Bo	x <u>NQT</u> :	acceptable)	T* .	23
Name:	Sam J. Saad III, PA			• •	t->
	2670 Airport-Pulling Road South			شة	
Office Address:	*	2012			
	Naples (City)		, Florida 34112 (Zip code)		
	Sam J. Saad III				
•	(Registered agent	्ध्याधावार)			
771	-	v signature)			
The name, title or capacity:	city and address of the person(s) who h Name and Address:	nas/have	authority to manage is/are:	Name and A	ddress:
	city and address of the person(s) who h	nas/have		Name and A	ddress:
Title or Capacity:	city and address of the person(s) who h Name and Address:	as/have <u>T</u> i		Name and A	ddress:
Title or Capacity:	city and address of the person(s) who h Name and Address: Gregory M. DeLacre 1421 Pine Ridge Road Ste 12	as/have <u>T</u> i		Name and A	ddress:
Title or Capacity:	city and address of the person(s) who h Name and Address: Gregory M. DeLacre 1421 Pine Ridge Road Ste 12	as/have <u>T</u> i		Name and A	ddress:
Title or Capacity:	city and address of the person(s) who h Name and Address: Gregory M. DeLacre 1421 Pine Ridge Road Ste 12	as/have <u>T</u> i		Name and A	ddress:
Title or Capacity:	city and address of the person(s) who h Name and Address: Gregory M. DeLacre 1421 Pine Ridge Road Ste 12	as/have <u>T</u> i		Name and A	ddress:
Authorized Member Jse attachments if necessa Attached is a certificate of isdiction under the law of	city and address of the person(s) who h Name and Address: Gregory M. DeLacre 1421 Pine Ridge Road Ste 12 Naples, FL 34109 ary) of existence, no more than 90 days old, of which it is organized. (If the certifica	as/have Ti	the or Capacity:	ring custody of	`records
Title or Capacity: Authorized Member Jse attachments if necess: Attached is a certificate orisdiction under the law of the translator must be suit. This document is execu	city and address of the person(s) who h Name and Address: Gregory M. DeLacre 1421 Pine Ridge Road Ste 12 Naples, FL 34109 ary) of existence, no more than 90 days old, of which it is organized. (If the certifica	duly au ate is in a hird degr	thenticated by the official hav foreign language, a translation,	ring custody of on of the certification that any false 817.155, F.S.	records

Typed or printed name of signee



Department of Licensing and Regulatory Affairs

Lansing, Michigan

This is to Certify That

INTELLIGENT INSTRUMENTATION, LLC

was validly organized on June 5, 2015 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 1476762

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 26th day of October, 2017

Julia Dale, Director

Corporations, Securities & Commercial Licensing Bureau