

11/8/2017

Division of Corporations

**Florida Department of State**  
**Division of Corporations**  
**Electronic Filings Cover Sheet**

**M1700029496 11**

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations  
 Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM  
 Account Number : FCA000000023  
 Phone : (512)418-6949  
 Fax Number : (954)208-0845

**\*\*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**  
**Bayshore Wolverine Capital, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

2017 NOV -8 PM 12:01

17 NOV -8 PM 9:32

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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Bayshore Wolverine Capital, LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, 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:

Valerie Banas, Paralegal

Name of Person

Honigman Miller Schwartz and Cohn LLP

Firm/Company

660 Woodward Avenue, Suite 2290

Address

Detroit, MI 48226

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Valerie Banas, Paralegal

313

465-7226

at ( )

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

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &  
Certificate of Status

☐ \$155.00 Filing Fee &  
Certified Copy

☐ \$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:

1. Bayshore Wolverine Capital, 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

(Jurisdiction under the law of which foreign limited liability company is organized)

3.

(FEI number, if applicable)

(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0901 & 605.0905, F.S. to determine penalty liability.)

5. 31200 Northwestern Highway

(Street Address of Principal Office)

Farmington Hills, MI 48334

6. 31200 Northwestern Highway

(Mailing Address)

Farmington Hills, MI 48334

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation

(City)

, Florida 33324

(Zip code)

**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 comply with 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.

By: Stephanie Hencz C T Corporation System

Stephanie Hencz, Assistant Secretary

(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

**Title or Capacity:****Name and Address:****Title or Capacity:****Name and Address:**

Manager

Ross H. Partrich

31200 Northwestern Highway  
Farmington Hills, MI 48334

(Use attachments if necessary)

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)

10. 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.

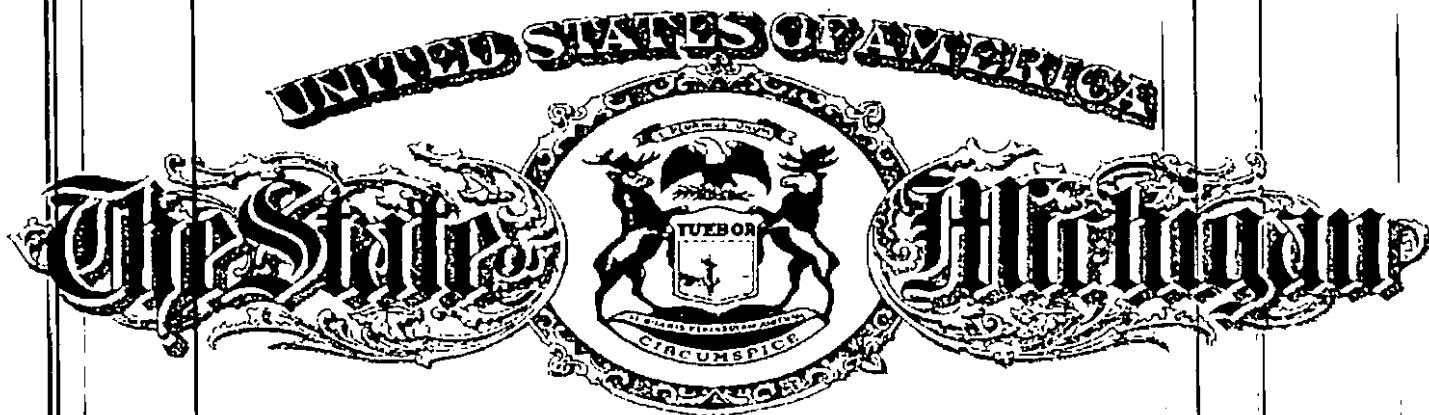
Valerie Banas

Signature of an authorized person

Valerie Banas, Authorized Person

Typed or printed name of signer

FILED  
17 NOV -8 AM 9:38  
CLERK OF THE COURT  
JANUARY



Department of Licensing and Regulatory Affairs

Lansing, Michigan

This is to Certify That

**BAYSHORE WOLVERINE CAPITAL, LLC**

was validly authorized on March 22, 2016, as a Michigan DOMESTIC LIMITED LIABILITY COMPANY, and 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 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.



In testimony whereof, I have hereunto set my hand,  
in the City of Lansing, this 8th day of November, 2017.

Julia Dale, Director

Corporations, Securities & Commercial Licensing Bureau

Sent by electronic transmission

Certificate Number: 17111270010

Verify this certificate at: URL to eCertificate Verification Search <http://www.michigan.gov/corpverify/certificate>.