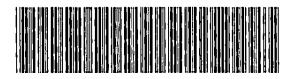
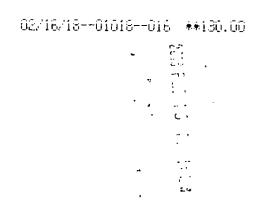
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(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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FEB 1 9 70:00 J. HARRIS

ANTHONY J. GARGANO, P.A.

February 12, 2018

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

RE: Stacey Development, LLC

Ladies and Gentlemen:

Please file the enclosed Application of Foreign Limited Liability Company for Authorization to Transaction Business in Florida.

I have enclosed a check in the amount of \$130.00 to cover the cost of the filing and certificate of status.

Finally, I have enclosed a self-addressed return envelope for your use in returning confirmation of filing and status.

Thank you for your assistance and if you have any questions, please call the undersigned immediately at 239-337-2280.

Sincerely,

Anthony X

Gargano,

Judy Perr√

/jp

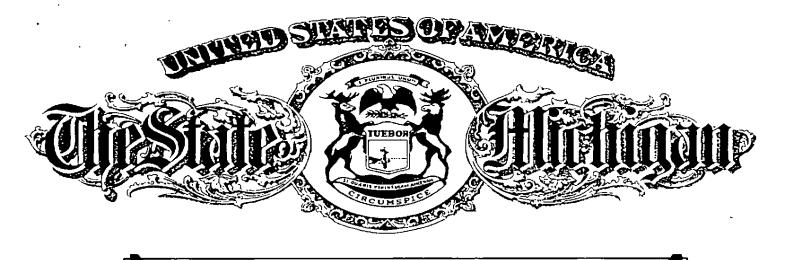
enclosures

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:

7/18/17	ign limited liability company is organized) Onte first transacted business in Florida, if prior tee sections 605 0904 & 605 0905, F.S. to deter	3. 80-0101286 (FEI num	
(Jurisdiction under the law of which fore 7/18/17 (I) (S) 3188 Lexham Lane (Street Address of Principal	Date first transacted business in Florida, if prior t	(Fi:I num	
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3188 Lexham Lane (Street Address of Principal	ec sections our often te one offers, i is to deter-	o registration)	
(Street Address of Principal		6. 3188 Lexham Lane	
Rochester Hills, MI 48309	Office)	(Mailing Ad	dress) (2
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Name and <u>street address</u> of F	lorida registered agent: (P.O. Bo	x <u>NOT</u> acceptable)	
Name: Antl	hony J. Gargano, P.A.		
	VIII - 12 - C- C- 105		- (7)
Office Address: 2240) West First St., Suite 105		
Fort	Myers	. Florida 33901	
	y position as registered agent.		duties, and I am familiar
Anth	iony J. Gargano	Nagaature)	
	ony J. Gargano (Registered agent)	-	
The name, title or capacity a	nony J. Gargano (Registered agent) and address of the person(s) who leads to the person (s) which is the person (s) who leads to the person (s) which the person (has/have authority to manage is/are:	
The name, title or capacity a Title or Capacity:	(Registered agent) and address of the person(s) who lead Name and Address:	nas/have authority to manage is/are: <u>Title or Capacity:</u>	Name and Address:
. The name, title or capacity a	(Registered agent) and address of the person(s) who be a Name and Address: William L. Stacey	has/have authority to manage is/are:	Name and Address: Shawn M. Stacey 3188 Lexham Lane
The name, title or capacity a Title or Capacity:	nony J. Gargano (Registered agent) and address of the person(s) who be a Name and Address: William L. Stacey	nas/have authority to manage is/are: <u>Title or Capacity:</u>	Name and Address: Shawn M. Stacey
The name, title or capacity a Title or Capacity:	(Registered agent) and address of the person(s) who be a Name and Address: William L. Stacey	nas/have authority to manage is/are: <u>Title or Capacity:</u>	Name and Address: Shawn M. Stacey 3188 Lexham Lane
The name, title or capacity a Title or Capacity:	(Registered agent) and address of the person(s) who be a Name and Address: William L. Stacey	nas/have authority to manage is/are: <u>Title or Capacity:</u>	Name and Address: Shawn M. Stacey 3188 Lexham Lane
The name, title or capacity a Title or Capacity:	(Registered agent) and address of the person(s) who be a Name and Address: William L. Stacey	nas/have authority to manage is/are: <u>Title or Capacity:</u>	Name and Address: Shawn M. Stacey 3188 Lexham Lane

Typed or printed name of signee



Department of Licensing and Regulatory Affairs

Lansing, Michigan

This is to Certify That STACEY DEVELOPMENT, LLC

was validly authorized on October 10, 2003, 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 5th day of February , 2018.

Julia Dale, Director

Corporations, Securities & Commercial Licensing Bureau