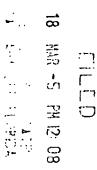
## M18000002226

Office Use Only



500309477535

03/02/18--01007--029 \*\*130.00



J. LEGGETT MAR 0 6 2018

## **COVER LETTER**

TO: Registration Section

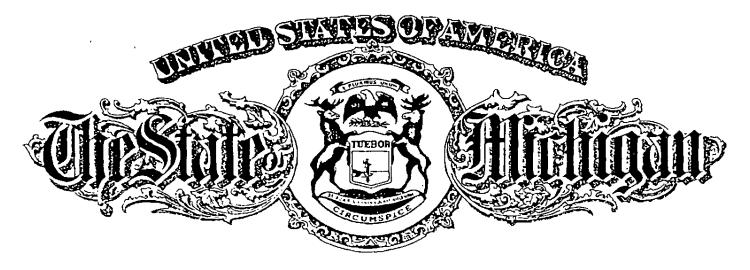
Div	rision of Corporatio	D.5				
SU <b>BJE</b> CT:	UNIVERSITY VII	RAL, LLC.				
50 <b>20</b> 501.		Name of	Limited Liability	Company		
The enclosed Existence, ar	d "Application by Fo	reign Limited Liability Com ed to register the above refer	pany for Authoriza enced foreign limi	ation to Tr ited liabilit	ansact Business in Florida," ( y company to transact busine	Certificate of ess in Florida.
Please return	all correspondence	concerning this matter to the	following:			
	MATTHEW F	R CARROLL				
	<del></del>	N	ame of Person			
	UNIVERSITY	VIRAL, LLC.				
	<del></del>	F	imn/Company			
	225 FAIRGRO	OVE AVE. ROYAL OAK 48	3067			
	· · · · · · · · · · · · · · · · · · ·		Address			
	ROYAL OAK	48067				
		City/S	tate and Zip Code			
	matt@university	viral.com				
		E-mail address: (to be use	d for future annua	report no	tification)	
For further in	nformation concerning	g this matter, please call:				
MA	ATTHEW R CARRO	DLL	248 at (	860-60	43	
<del></del>	Name o	of Contact Person	Area Code	Day	time Telephone Number	
Divi Reg P.O.	ILING ADDRESS: ision of Corporations istration Section . Box 6327 ahassee, FL 32314			Division Registrat Clifton B 2661 Exe	of Corporations ion Section suilding ecutive Center Circle see, FL 32301	
	check for the follow 125.00 Filing Fee	ing amount:  \$\forall \forall 130.00 \text{ Fiting Fee & Certificate of Status}	☐ \$155.00 Filin Certified Copy	ng Fee &	☐ \$160.00 Filing Fee, Cer of Status & Certified Copy	

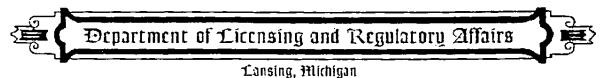
## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANYTOTRANSACT BUSINESS IN THE STATE OF FLORIDA:

	name adopted for the purpose of transacting business in I		,,,
MICHIGAN (Jurisdiction under the law of	which foreign limited liability company is organized)	3. <u>82-3132375</u> (FEI man	ober, if applicable)
MARCH 3rd 2018			
	(Date first transacted business in Florida, if prior (See sections 605.0904 & 605.0905, F.S. to deter	to registration.)	<del></del>
	VE ROYAL OAK MI 48067	6. 225 FAIRGROVE AVE R	ROYAL OAK MI 48067
(Street Address	(Principal Office)	(Mailing Add	droes)
Name and street addr	ess of Florida registered agent: (P.O. Bo		
Name:	REGISTERED AGENT SOLUTION	IS INC	
	155 Office Plaza Dr., Suite A		
Office Address	133 Office I Maza Dr., Suite A	<u> </u>	
gistered agent's according been named as signated in this applic comply with the provi	Tallahassee (City)	as registered agent and agree to act	d liability company at the pi t in this capacity. I further
gistered agent's according been named as signated in this applic comply with the provi	Tallahassee  (City)  reptance:  registered agent and to accept service of  ration, I hereby accept the appointment  sions of all statutes relative to the proper  ns of my position as registered agent	(Zip tool f process for the above stated limited as registered agent and agree to act or and complete performance of my  Adam Saldaña, Assistant Sec	d liability company at the pi t in this capacity. I further dutles, and I am familiar w
gistered agent's according been named as signated in this applic comply with the provided accept the obligation	Tallahassee  (City)  registered agent and to accept service of  vation, I hereby accept the appointment  sions of all statutes relative to the proper  ns of my position as pegistered agent  (citizened agent)	(Zip confirmation)  [Process for the above stated limited as registered agent and agree to act or and complete performance of my  Adam Saldaña, Assistant Security (1998)	d liability company at the pi t in this capacity. I further duttes, and I am familiar w
gistered agent's according been named as signated in this applic comply with the provid accept the obligation	Tallahassee  (City)  reptance:  registered agent and to accept service of  ration, I hereby accept the appointment  sions of all statutes relative to the proper  ns of my position as registered agent	(Zip confirmation)  [Process for the above stated limited as registered agent and agree to act or and complete performance of my  Adam Saldaña, Assistant Security (1998)	d liability company at the pi t in this capacity. I further duttes, and I am familiar w
gistered agent's according been named as signated in this application with the provide accept the obligation.  The name, title or ca	Tallahassee  (City)  registered agent and to accept service of pation, I hereby accept the appointment issons of all statutes relative to the property of my position as registered agent passet agent passet agent passet and address of the person(s) who is	(Zip tool f process for the above stated limited as registered agent and agree to act or and complete performance of my  Adam Saldaña, Assistant Security signature) ass/have authority to manage is/are:	d liability company at the pi in this capacity. I further duttes, and I am familiar w
gistered agent's according been named as signated in this application with the provided accept the obligation. The name, title or carritle or Capacity:	Tallahassee  (City)  sprance:  registered agent and to accept service of pation, I hereby accept the appointment sions of all statutes relative to the properts of my position is registered agent pacity and address of the person(s) who hame and Address:  Takudzwa Kubvoruno  225 Faingrove Ave Royal Oz	(Zip confirmation)  The process for the above stated limited as registered agent and agree to act or and complete performance of my  Adam Saldaña, Assistant Section in the superior of the su	d liability company at the pi in this capacity. I further duttes, and I am familiar w
gistered agent's according been named as signated in this application with the provided accept the obligation. The name, title or carritle or Capacity:	Tallahassee  (City)  sprance:  registered agent and to accept service of pation, I hereby accept the appointment sions of all statutes relative to the properts of my position is registered agent pacity and address of the person(s) who have and Address:  Takudzwa Kubvoruno	(Zip confirmation)  The process for the above stated limited as registered agent and agree to act or and complete performance of my  Adam Saldaña, Assistant Section in the superior of the su	d liability company at the pi in this capacity. I further duttes, and I am familiar was retary
gistered agent's according been named as signated in this application with the provid accept the obligation. The name, title or cautile or Capacity:	Tallahassee  (City)  sprance:  registered agent and to accept service of atton, I hereby accept the appointment sions of all statutes relative to the property of my position as registered agent of the person(s) who have and Address;  Takudzwa Kubvoruno  225 Fairgrove Ave Royal Oa MI 48067  Matthew R Carroll	(Zip configuration)  for process for the above stated limited as registered agent and agree to acted and complete performance of my  Adam Saldaña, Assistant Section is signature)  mas/have authority to manage is/are:  Title or Capacity:	d liability company at the pit in this capacity. I further duttes, and I am familiar we retary  Name and Address:
gistered agent's accoving been named as signated in this appliationally with the provide accept the obligation. The name, title or causing a CEO	Tallahassee  (City)  sprance:  registered agent and to accept service of atton, I hereby accept the appointment sions of all statutes relative to the property of my position as registered agent pacity and address of the person(s) who have and Address:  Takudzwa Kubvoruno  225 Fairgrove Ave Royal Oa MI 48067	(Zip configuration)  for process for the above stated limited as registered agent and agree to acted and complete performance of my  Adam Saldaña, Assistant Section is signature)  mas/have authority to manage is/are:  Title or Capacity:	d liability company at the plat in this capacity. I further duttes, and I am familiar we retary  Name and Address:

Typed or printed mans of signes





This is to Certify That

UNIVERSITY VIRAL LLC

was validly organized on October 18, 2017, 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.

CONTROL AND ALL AND AL

Sent by electronic transmission

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 26th day of February, 2018.

Julia Dale, Director

Corporations, Securities & Commercial Licensing Bureau