

M1800000 529 3

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

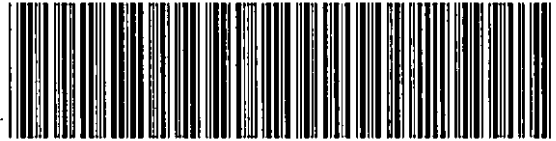
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/12/18--01007--026 **160.00

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2018 MAY 31 AM 6:12
FBI - ALABAMA

FILED

JUN 05 2019
J. HARRIS

M18-35673

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: MSX INTERNATIONAL RNS 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:

BETH SAHR

Name of Person

MSX INTERNATIONAL, INC

Firm/Company

26555 EVERGREEN ROAD

Address

SOUTHFIELD MI 48076

City/State and Zip Code

BSAHR@MSXI.COM

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

For further information concerning this matter, please call:

BETH SAHR

248

829-6050

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 16, 2018

BETH SAHR
26555 EVERGREEN ROAD
SOUTHFIELD, MI 48076

SUBJECT: MSX INTERNATIONAL RNS, LLC
Ref. Number: W18000035673

We have received your document for MSX INTERNATIONAL RNS, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris
Regulatory Specialist II

Letter Number: 918A00007583

RECEIVED
MAY 31 2018

FILED
2018 MAY 31 AM 6:12
TALLAHASSEE FL 09402

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. MSX INTERNATIONAL RNS 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. DELAWARE 3. 82-3432947
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. JANUARY 1, 2018
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 26555 EVERGREEN ROAD 6. 500 WOODWARD AVE
(Street Address of Principal Office) (Mailing Address)
SOUTHFIELD, MI 48076 21ST FLOOR-STE 2150
SOUTHFIELD MI 48076

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

Name: CT CORPORATION SYSTEM
Office Address: 1200 SOUTH PINE ISLAND ROAD
PLANTATION, Florida 33324
(City) (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.

[Signature] Jay Shipman, Asst. 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:
DP	FREDERICK K MINTURN 26555 EVERGREEN ROAD SOUTHFIELD MI 48076	S	MARGARET TURNER 26555 EVERGREEN ROAD SOUTHFIELD MI 48076
T	SAM DEL MAR 26555 EVERGREEN ROAD SOUTHFIELD MI 48076	AT	DAVID CRITTENDEN 26555 EVERGREEN ROAD SOUTHFIELD MI 48076

(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.

[Signature]
Signature of an authorized person

SAM DEL MAR
Typed or printed name of signer

Delaware

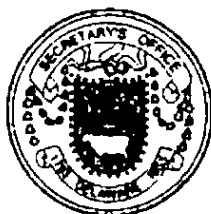
The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MSX INTERNATIONAL RNS, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-SIXTH DAY OF MARCH, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

FILED
2018 MAY 31 AM 6:12
JALAN AUSTIN




Jeffrey W. Bullock, Secretary of State

6617877 8300

SR# 20182180982

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 202390066

Date: 03-26-18

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

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Office Address: 1200 SOUTH PINE ISLAND ROAD
PLANTATION, Florida 33324
(City) (Zip code)

2018 MAY 31 AM 6:12
ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE 05-31-2018 BY 60322 JAL/MLA

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(Registered agent's signature)

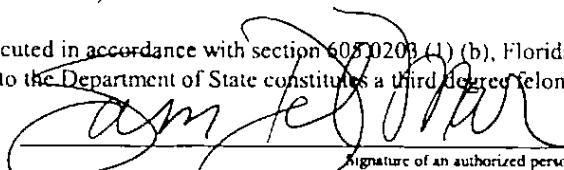
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<u>DP</u>	<u>FREDERICK K MINTURN</u> <u>26555 EVERGREEN ROAD</u> <u>SOUTHFIELD MI 48076</u>	<u>S</u>	<u>MARGARET TURNER</u> <u>26555 EVERGREEN ROAD</u> <u>SOUTHFIELD MI 48076</u>
<u>T</u>	<u>SAM DEL MAR</u> <u>26555 EVERGREEN ROAD</u> <u>SOUTHFIELD MI 48076</u>	<u>AT</u>	<u>DAVID CRITTENDEN</u> <u>26555 EVERGREEN ROAD</u> <u>SOUTHFIELD MI 48076</u>

(Use attachments if necessary)

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Signature of an authorized person

SAM DEL MAR

(Typed or printed name of signer)