

m18000011403

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

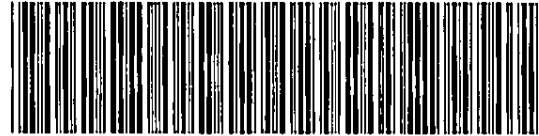
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200320482802

11/06/18--01018--018 **125.00

FILED
18 DEC 19 PM 1:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

BL VORISEK
DEC 18 2018

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: The New SeaLift, 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:

Andrew L. Rassi

Name of Person

Schnelker, Rassi & McConnell, PLC

Firm/Company

44 Grandville Ave SW, Suite 200

Address

Grand Rapids, Michigan 49503

City/State and Zip Code

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

For further information concerning this matter, please call:

Andrew L. Rassi

616

828-1195

Name of Contact Person

at (_____) _____
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

November 28, 2018

ANDREW L. RASSI
SCHNELKER, RASSI & MCCONNELL, PLC
44 GRANDVILLE AVE SW, SUITE 200
GRAND RAPIDS, MI 49503

SUBJECT: THE NEW SEALIFT, LLC
Ref. Number: W18000102797

We have received your document for THE NEW SEALIFT, LLC and your check(s) totaling \$125.00. 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.

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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 (805) 245-6000.

Brenda L Vorisek
Director

Letter Number: 718A00024255

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. The New Sealift, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," or "LLC.")
- (If none available, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "LLC," or "LLC.")
2. Michigan
(Jurisdiction under the law of which foreign limited liability company is organized)
3. _____
(FEI number, if applicable)

4. _____
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. 927 Alpine Commerce Drive, Suite 800
(Street Address of Principal Office)
Grand Rapids, Michigan 49544
6. 927 Alpine Commerce Drive, Suite 800
(Mailing Address)
Grand Rapids, Michigan 49544

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

Name: Stephen Johns

Office Address: 613 Cidco Road
Cocoa, Florida 32926
(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]
(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:
	SEE ATTACHED		

(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)

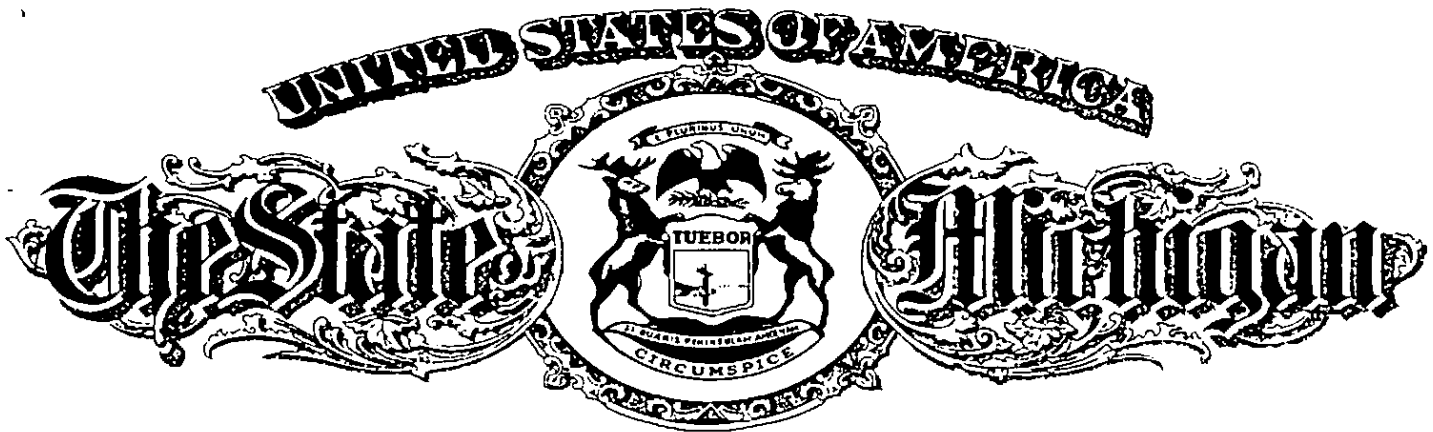
Robert C. Zanders
(Typed or printed name of signer)

FILED
18 DEC 10 PM 1:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Attachment to:
Application by Foreign Limited Liability Company for Authorization to Transact Business
in Florida

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:
Manager	Robert C. Zwiers 927 Alpine Commerce Park Dr., Suite 800 Grand Rapids, Michigan 49544
Manager	Gregory F. Vogel 927 Alpine Commerce Park Dr., Suite 800 Grand Rapids, Michigan 49544



Department of Licensing and Regulatory Affairs

Lansing, Michigan

This is to Certify That
THE NEW SEALIFT, LLC

was validly authorized on October 4, 2018, 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.



Sent by electronic transmission

Certificate Number: 18118963320

In testimony whereof, I have hereunto set my hand,
in the City of Lansing, this 1st day of November, 2018.

Julia Dale, Director

Corporations, Securities & Commercial Licensing Bureau