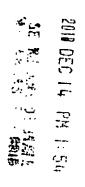
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M. MILLIGAN DEC 21 2018

COVER LETTER

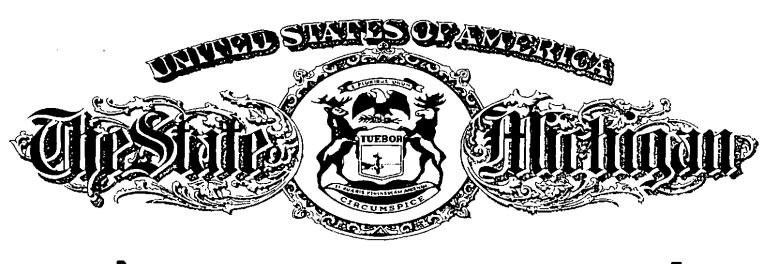
	, gistration Section vision of Corporation	18						
UBJECT:	AT Davie, LLC							
UDJECT		Name of Limited Liability Company						
he enclosed xistence, a	d "Application by For nd check are submitte	eign Limited Liability Com d to register the above refer	pany for Authoriza enced foreign limi	ation to Tra ted liabilit	ansact Business in Florida," Ce y company to transact business	rtifica in Flo		
ease returi	n all correspondence o	concerning this matter to the	following:					
	Rence Cote							
		N	lame of Person	_				
	Aqua Tots Swi	n School						
		ĮF	irm/Company					
	31221 W 14 M	ile Rd						
			Address					
	Farmington Hil	ls, MI 48334						
		City/S	State and Zip Code		<u></u>			
	accountingatd@a	iqua-tots.com			Æ			
		E-mail address: (to be use	d for future annual	report no	tification)			
or further i	nformation concernin	g this matter, please call:						
Re	nee Cote		248 at (431-72 _)				
	Name o	f Contact Person	Area Code	Day	rtime Telephone Number			
Div Reg P.O	AILING ADDRESS: vision of Corporations gistration Section D. Box 6327 lahassec, FL 32314			Division Registrat Clifton B 2661 Exc	<u>CADDRESS:</u> of Corporations ion Section duilding ceutive Center Circle see, F1, 32301			
	a check for the follow \$125.00 Filing Fee	ing amount: S130,00 Filing Fee & Certificate of Status	S155.00 Filir Certified Copy	ng Fee &	□ \$160.00 Filing Fee. Certift of Status & Certified Copy	icate		

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:

	, , ,	ni rionda ine ancu	ate name must include "Limited I	statistic company, tale c. or tale.
Michigan		3. 8	3-1966592	
(Jurisdiction under the law of w	hich foreign limited liability company is organized)	_ · ·	(FEI nu	umber, if applicable)
	(Date first transacted business in Florida, if pr (See sections 605,0904 & 605,0905, F.S. to de	or to registration.)	dity)	
11510 W State Rd 84			221 W 14 Mile Rd	
(Street Address of	Principal Office)	_	(Mailing A	<u> </u>
Davie, FL 32966			rmington Hills, MI 483	334
		_		2 5 m
Name and street addre	ss of Florida registered agent: (P.O.	Box <u>NOT</u> acc	eptable)	યા 🗓
Name:	Ronei Foumia			
0.77	7011 SW 83rd PI			· 15
	7011 5 17 051011			70 1 21
Office Address:				#11.
gistered agent's acception ving been named as reignated in this application with the provise	Miami (City) otance: egistered agent and to accept service ation, I hereby accept the appointme ions of all statutes relative to the pro s of my position as ragistered agent.	nt as registere oper and comp	d agent and agree to a	ed liability company at the plo ct in this capacity. I further t
gistered agent's acceptiving been named as resignated in this applications with the provise	(City) Otance: Egistered agent and to accept service tion, I hereby accept the appointme ions of all statutes relative to the pros of my position as registered agent.	nt as registere	(Zip c the above stated limite d agent and agree to ac	ed liability company at the plo ct in this capacity. I further t
gistered agent's acception of the second agent's acception of the second agent's application of the second accept the obligation of the second accept the obligation of the second accept the second acceptance	Otance: Egistered agent and to accept service etion, I hereby accept the appointme ions of all statutes relative to the pro s of my position as registered agent. (Registered ag	nt as registere oper and comp	(Zip c the above stated limite d agent and agree to a dlete performance of m	ed liability company at the ploct in this capacity. I further of y duties, and I am familiar w
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Typed or printed name of signee



Department of Licensing and Regulatory Affairs

Lansing, Michigan

This is to Certify That AT DAVIE LLC

was validly authorized on September 20, 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: 18119115090

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 9th day of November, 2018.

Julia Dale, Director

Corporations, Securities & Commercial Licensing Bureau