

M19000000371

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

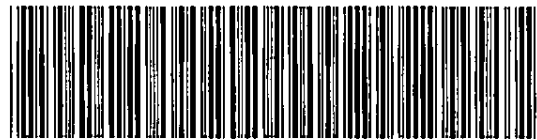
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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JAN 02 2019

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19 JAN -2 AM 8:33
TALLAHASSEE, FLORIDA

K SALLY
JAN 11 2019

DRS PROPERTY MANAGEMENT LLC

8255 CASCADE DR., SUITE 120, COMMERCE MI 48382

248-363-6111

December 27, 2018

Division of Corporations
Registration Section
POBOX 6327
Tallahassee, FL 32314

To Whom it May Concern:

Attached is my application to file DRS Property Management, LLC as a foreign LLC to transact business in the State of Florida, a check for \$125.00 made payable to Florida Department of State, and the Certificate of Good Standing issued by the State of Michigan.

Please process accordingly and if you have any questions, contact me directly at 248.363.6111.

Sincerely,



Teresa I Schenk
Manager

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: DRS Property Management, 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:

Teresa I Schenk

Name of Person

DRS Realty Company

Firm/Company

8255 Cascade St. Suite 120

Address

Commerce Twp, MI 48382

City/State and Zip Code

Teresa@drsmhc.com

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

For further information concerning this matter, please call:

Teresa Schenk

248

363-6111

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

**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. DRS Property Management, 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. Michigan 3. _____
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 01/01/2019
(Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 8255 Cascade St., Suite 120 6. 8255 Cascade St., Suite 120
(Street Address of Principal Office) (Mailing Address)

Commerce Twp. MI 48382 Commerce Twp. MI 48382

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

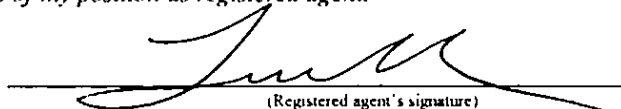
Name: Teresa Schenk

Office Address: 200 S. Banana River Drive

Merritt Island 32952
(City) , Florida (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.


(Registered agent's signature)

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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

Teresa Schenk

8255 Cascade St., Suite 120

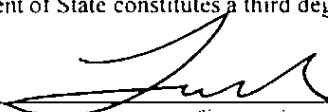
Commerce Twp. MI 48382

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(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 of an authorized person

Teresa Schenk

Typed or printed name of signee



Department of Licensing and Regulatory Affairs

Lansing, Michigan

This is to Certify That

DRS PROPERTY MANAGEMENT, LLC

was validly authorized on November 27, 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.



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

A handwritten signature in black ink, appearing to read "Julia Dale".

Julia Dale, Director

Corporations, Securities & Commercial Licensing Bureau

Sent by electronic transmission

Certificate Number: 18120049410

Verify this certificate at: URL to eCertificate Verification Search <http://www.michigan.gov/corpverifycertificate>.