

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	· ·
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



600341187316

03/04/20--01017--006 \*\*135.00

2020 T. T. - 4 F.H 3: 36

T GLASS

## COVER LETTER

TO:

Registration Section Division of Corporations

CUDIECT.	Storlando Canoe Cre	ek, LLC					
SUBJECT:		Name of Limited Liability Company					
The enclosed Existence, an	d "Application by Fore nd check are submitted	rign Limited Liability Compan I to register the above reference	y for Authoriza ed foreign limi	ntion to Transact B ted liability compa	usiness in Florida, my to transact busi	" Certificate of ness in Florida.	
Please return	n all correspondence co	oncerning this matter to the fol	lowing:				
	Edward C. Daw	da					
	Name of Person					-	
	Dawda, Mann, Mulcahy & Sadler, PLC						
Firm/Company						-	
	39533 Woodward Avenue, Suite 200						
		· · · · · · · · · · · · · · · · · · ·	Address			-	
	Bloomfield Hill:	s, MI 48304					
	City/State and Zip Code						
	phelps362@gmai					_	
		E-mail address: (to be used for	or future annua	l report notification	1)		
For further in	nformation concerning	this matter, please call:				6337	
She	erry Kanigowski		248 at (	642-3902		2023 11 12 - 6	
	Name of	Contact Person	Area Code	Daytime Te	lephone Number	- t-	
Div Reg P.C	AILING ADDRESS: vision of Corporations gistration Section D. Box 6327 llahassee, FL 32314			STREET ADDS Division of Corp Registration Sect Clifton Building 2661 Executive C Tallahassee, FL	orations ion Center Circle	F'' 3: 36	
	closed is a check for th ase make check payabl	e following amount: le to: FLORIDA DEPARTM	ENT OF STA	TE			
	\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status		Filing Fee & lied Copy	□ \$160.00 Filing of Status & Ce	Fee. Certificate rtified Copy	

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

IN COMPILANCE 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:

Storlando Canoe Creek					
(Name of Foreign	Limited Liability Company; must include "Limit	ed Liability Con	npany," "L.L.C.," or "LLC.")		
7/1	name adopted for the purpose of transacting business in Fl	adda Tha shamar	many facility of march trabiles Common		
	name adopted for the purpose of transacting business in ri	onda ine assemass	e name must include Limited Culotiny Company	. LLC, OF LLC.	
Michigan 2	high foreign limited liability company is organized)	3	(FEI number, if applicab	T'':	
(Jurisdiction under the law of w	luch foreign lumited liability company is organized)		(Fit number, if applicab	ie)	
4	(Date first transacted business in Florida, if prior to (See sections 605 0904 & 605 0905, F.S. to determ	registration ) une penalty liability	у)		
1795 Maplelawn Drive		1795 Maplelawn Drive			
5. (Street Address of	Principal Office)	ь	(Matling Address)		
Troy, MI 48084		Troy. MI 48084			
				1~0	
				2020 H.	
7. Name and street addre	ss of Florida registered agent: (P.O. Bo	NOT accer	otable)		
************			,	1	
	C T Corporation System			7	
Name:	<del> </del>		_	دب	
Office Address:	1200 South Pine Island Road		_	े अ अ	
	Plantation		33324 , Florida		
	(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.

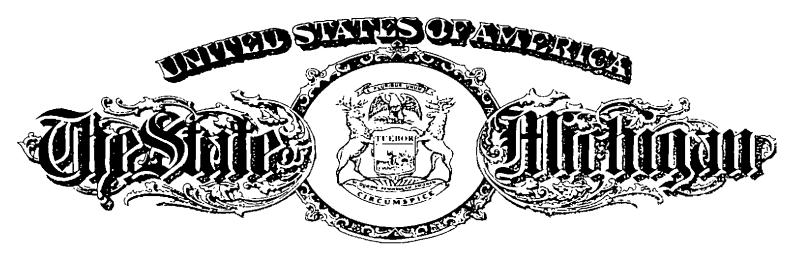
By: Stephanie Honcz

(Registered agent's signature Assistant Secretary

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]: Name and Address: Title or Capacity: Name and Address: Title or Capacity: Name: \_ Name: Jeffrey Phelps ■ Manager ■ Manager Address: 1795 Maplelawn Drive 1795 Maplelawn Drive Member ■ Member Troy, MI 48084 Troy, Ml 48084 ☐ Authorized \_\_\_Authorized Person Person Other\_\_\_\_ Other Other\_ Other\_\_\_ Name: \_\_\_\_\_\_ Manager | Manager Member Address: Member Address: \_\_\_\_\_ Authorized Authorized Person Person Other Other\_\_\_\_\_ Other Other Manager Manager Address: \_\_\_\_\_ Member Member Authorized Authorized Person Person Other\_\_\_\_\_\_ Other\_\_\_\_ Other Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed individuals may be added to the index when filing your Florida Department of State Annual Report form. 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. Kylie E. Brigmann—
Signature of an authorized person

Kylie E. Bergmann, Authorized Representative (not a Member)

Typed or printed name of signee





This is to Certify That STORLANDO CANOE CREEK, LLC

was validly authorized on February 24, 2020, 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.

Tomportal Little A Commercial Little

Sent by electronic transmission

Certificate Number: 20029052770

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 28th day of February, 2020.

Linda Clegg, Interim Director

Corporations, Securities & Commercial Licensing Bureau