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(Requestor's Name)

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(Address)

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(Address)

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(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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FEB 02 2021  
FEB 02 2021

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: MOSAIC BUILDING GROUP 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:

MICHAEL J. BLUM  
Name of Person

MOSAIC BUILDING GROUP LLC  
Firm/Company

13532 CANTERBURY COURT  
Address

PLYMOUTH, MI 48170  
City/State and Zip Code

INFO@MOSAICGROUPMI.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MICHAEL J. BLUM at ( 734 ) 624-1499  
Name of Contact Person Area Code Daytime Telephone Number

**Mailing Address:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$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 605.002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY  
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. MOISAC BUILDING GROUP LLC  
(Name of Foreign Limited Liability Company, must include "Limited Liability Company," "LLC," or "L.L.C.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "LLC," or "L.L.C.")

2. MICHIGAN 3. 42-468-1063  
(Jurisdiction under the law of which foreign limited liability company is organized) (E.F. number, if applicable)

4. NO TRANSACTIONS AS OF REGISTRATION APPLICATION  
(State first transacted business in Florida, if prior to registration.)  
(See sections 605.002 & 605.003, F.S., to determine penalty liability.)

5. MOISAC BUILDING GROUP LLC  
(Street Address or Principal Office)

6. MOISAC BUILDING GROUP LLC  
(Mailing Address)

13522 CANTERBURY COURT

871 VENETIA BAY BLVD. SUITE 201

PLYMOUTH, MI 48170

VENICE, FL 34285

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

Name: JIM HAMMAR

Office Address: 871 VENETIA BAY BLVD. SUITE 201

VENICE, Florida 34285  
(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)

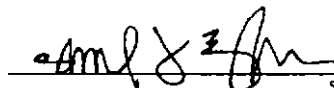
8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<input type="checkbox"/> Manager	Name: <u>MICHAEL J. BLUM</u>	<input type="checkbox"/> Manager	Name: <u>JIM HAMMAR</u>
<input checked="" type="checkbox"/> Member	Address: _____	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	<u>13532 CANTERBURY COURT</u>	<input type="checkbox"/> Authorized	<u>23889 WAVERLY CIRCLE</u>
Person	<u>PLYMOUTH, MI 48170</u>	Person	<u>VENICE, FL 34293</u>
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input checked="" type="checkbox"/> Other <u>REGISTERED</u>	<input type="checkbox"/> Other _____
		<u>AGENT</u>	
<input type="checkbox"/> Manager	Name: _____	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: _____	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	_____	<input type="checkbox"/> Authorized	_____
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Manager	Name: _____	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: _____	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	_____	<input type="checkbox"/> Authorized	_____
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____

**Important Notice:** Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

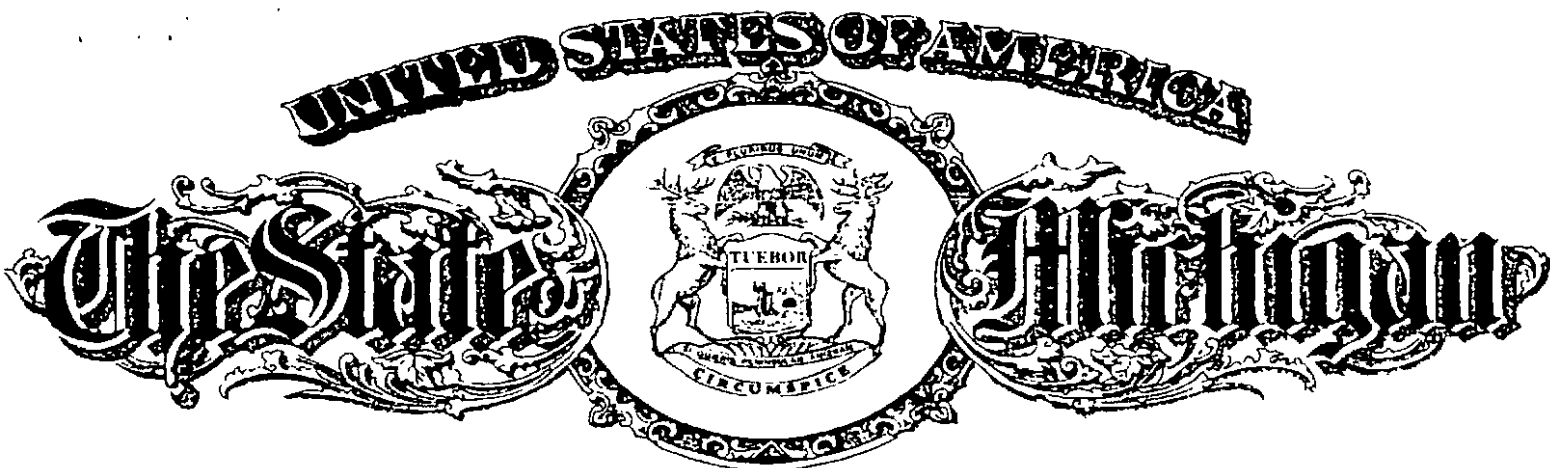
9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must 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.



Signature of an authorized person

MICHAEL J. BLUM - SOLE MEMBER | MOSAIC BUILDING GROUP LLC  
Typed or printed name of signee



**Department of Licensing and Regulatory Affairs**

**Lansing, Michigan**

*This is to Certify That*

**MOSAIC BUILDING GROUP LLC**

*was validly authorized on January 23, 2014, 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: 20093231660

*In testimony whereof, I have hereunto set my hand,  
in the City of Lansing, this 8th day of September, 2020.*

*Linda Clegg*

Linda Clegg, Interim Director

Corporations, Securities & Commercial Licensing Bureau