

12/15/2020

Division of Corporations

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Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : CORPORATION SERVICE COMPANY
Account Number : I20000000195
Phone : (850)521-0821
Fax Number : (850)558-1515

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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Foreign Limited Liability Company
Member Hubs Hospitality, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Member Hubs Hospitality, 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.

Jessica Wheaton
Name of Person

Hagerty
Firm/Company

121 Drivers Edge
Address

Traverse City, MI 49684
City/State and Zip Code

jwheaton@hagerty.com
E-mail address. (to be used for future annual report notification)

For further information concerning this matter, please call.

Jessica Wheaton at (231) 929-6028
Name of Contact Person 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

12/15/2020 10:46:33 AM

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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. Member Hubs Hospitality, 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. Delaware (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. 121 Drivers Edge (Street Address of Principal Office)
Traverse City, MI 49684
6. 121 Drivers Edge (Mailing Address)
Traverse City, MI 49684

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

Name: Corporation Service Company
Office Address: 1201 Hays Street
Tallahassee, Florida 32301

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: Corporation Service Company Elizabeth Kitchen, Assistant Secretary

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are.

Table with 4 columns: Title or Capacity, Name and Address, Title or Capacity, Name and Address. Rows include Manager Frederick Turcotte, Authorized Person Barbara Matthews, Manager Jessica Sullivan, Manager Soon Hagerty.

(Use attachments if necessary) See attachment for additional Managers

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

DocuSigned by: Barbara Matthews
Signature of an authorized person.

Barbara Matthews
Typed or printed name of signer

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Attachment

Member Hubs Miami, LLC

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	Name and Address	Title	Name and Address
Manager	John Belniak 121 Drivers Edge Traverse City, MI 49684	Manager	James H. Machinist 121 Drivers Edge Traverse City, MI 49684

2020-12-15 10:46:33

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MEMBER HUBS HOSPITALITY, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FIFTEENTH DAY OF DECEMBER, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MEMBER HUBS HOSPITALITY, LLC" WAS FORMED ON THE ELEVENTH DAY OF DECEMBER, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.

2020-12-15 10:46:33



Jeffrey W. Bullock
Jeffrey W. Bullock, Secretary of State

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SR# 20208653280

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 204324394

Date: 12-15-20