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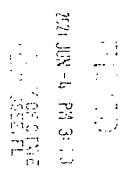
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FLORIDA DEPARTMENT OF STATE Division of Corporations

May 19, 2021

ANTHONY PAESANO 7457 FRANKLIN RD STE 200 BLOOMFIELD HILLS, MI 48301

SUBJECT: DEVMAR BAUM SPE, LLC

Ref. Number: W21000070562

We have received your document for DEVMAR BAUM SPE, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 221A00010539

Yvette Scott Document Specialist II

RECENIED NAME 28 2021

COVER LETTER

то:	Registration Section Division of Corporations		
SHRIF	DevMar Baum SPE, LLC		
.,(/1)31		me of Limited Liability Company	
The end Existen	closed "Application by Foreign Limited Liability ace, and check are submitted to register the above	y Company for Authorization to Transact Business in Florida, e referenced foreign limited liability company to transact busi	" Certificate iness in Flori
Please	return all correspondence concerning this matter	to the following:	
	Anthony Paesano		
		Name of Person	
	Pacsano Akkashian Apkarian PC		~:
	 -	Firm/Company	. 621
	7457 Franklin Rd, Ste 200		JU!! -
		Address -1	<u> </u>
	Bloomfield Hills, MI 48301	1	- P '. : ω
		City/State and Zip Code	-
	lgonino@paalawfirm.com	·	
	E-mail address: (to l	be used for future annual report notification)	•
For fur	ther information concerning this matter, please c	all:	
	Anthony Paesano	248 792-6886 at ()	
	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	
	Enclosed is a check for the following amount: Please make check payable to: FLORIDA DE \$125.00 Filing Fee \$130.00 Filing F Certificate	EPARTMENT OF STATE Fee & □ \$155.00 Filing Fee & ■ \$160.00 Filing Fee.	

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

IN COMPILANCE WITH SECTION 605:6902, FLORIDA STATUTES THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

L. DevMar Baum SPE, LI	.C					_
(Name of Foreign	Limited Liability Company; must include "Limited	Liability Company," "L L.C) ," or "LLC.")			
(If name unavailable, enter alternate n	ame adopted for the purpose of transacting business in Flo	rida. The alternate manie must in	elude "Limited Liabili	ty Company," "	L.C." or	"LLC.")
Delaware 2.		86-3075476 3.				_
(Jurisdiction under the law of w	nich foreign limited hability company is organized)		(FEI number, s	applicable)	,,,,	_, _
N/A 4.						د
·	(Date first transacted business in Florida, if prior to re (See sections 605 0904 & 605 0905, F.S. to determin	gistration) c penalty liability)		—	Ŧ	-
600 S ADAMS RD		600 S ADAMS	RD	9.Q M M M D	P: 3	
Street Address of Principal Office)		6. (Mailing Addr	css)	715		_
STE 330		STE 330		· : : : : : : : : : : : : : : : : : : :	رب	_
BIRMINGHAM, MI 48	3009	BIRMINGHAN	и, MI 48009			_
7. Name and street addres	s of Florida registered agent: (P.O. Box	<u>NOT</u> acceptable)				
Name:	Registered Agents, Inc.					
Office Address:	7901 4th St N Ste 300					
	St. Petersburg	, Florida	33702			
	(Cny)	11111111111	(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)

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]:

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
■Manager	Name: Mark DeMaria	□Manager	Name: Anthony Paesano
□Member	Address: 600 S Adams Rd	□Member	Address: 7457 Franklin Rd
□Authorized	Ste 330	Authorized	Ste 200
Person	Birmingham, MI 48009	Person	Bloomfield Hills, MI 48301
Other	Other	□Other	□Other ::
			1
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	् ल छ
Person		Person	
□Other	Other	□Other	
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	
Other	Other	□Other	□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 fellowy as provided for in s.817.155, F.S.

Anthony Paesano

Typed or printed name of signee

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "DEVMAR BAUM SPE, 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 TWENTY-FOURTH DAY OF MAY, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "DEVMAR BAUM SPE, LLC" WAS FORMED ON THE THIRTIETH DAY OF MARCH, A.D. 2021.



Authentication: 203281530

Date: 05-24-21