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S. ROBERTS NOV 19 2021

## COVER LETTER

TO:

Sarnia Holdings LLC 3.IECT:	
Nan	ne of Limited Liability Company
enclosed "Application by Foreign Limited Liability stence, and check are submitted to register the above	Company for Authorization to Transact Business in Florida," Certifica referenced foreign limited liability company to transact business in Florida.
se return all correspondence concerning this matter	to the following:
Samuel Chappelle	
	Name of Person
	Firm/Company
5030 Northwind Drive, Suite 120	
	Address
East Lansing, MI 48823	
	City/State and Zip Code
samc@c-devco.com	
E-mail address: (to b	e used for future annual report notification)
further information concerning this matter, please co	all:
Samuel Chappelle	517 719-4303 at ()
Name of Contact Person	Area Code Daytime Telephone Number
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810
Tallahassee, Fl. 32314	Tallahassee, FL 32303

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

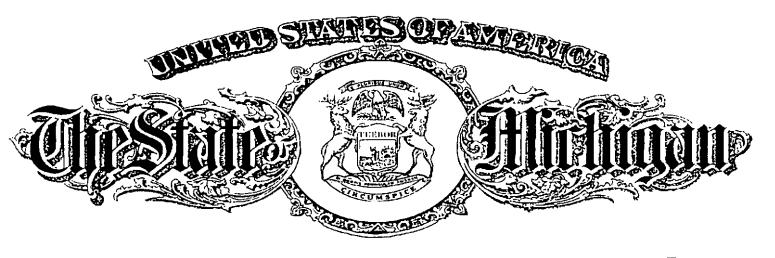
IN COMPLANCE WITH SECTION 605,0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED DABILITY COMPANYTOTRANSACT BUSINESS IN THE STATE OF FLORIDA:

If name unavailable, enter alternate	name adopted for the purpose of transacting business in Fl	orida. The alternate name n	nust include "Linuted Liability Con-	pany," "L.L.C," or	"LLC ")	
Michigan (Jurisdiction under the law of which foreign limited liability company is organized)		86-1775535				
		3. (FEI number, if applicable)				
	(Date first transacted business in Florida, if prior to (See sections 605 0904 & 605 0905, F.S. to determine	registration ) ne penalty hability)				
5030 Northwind Drive			wind Drive, Suite 120			
Street Address of Principal Office)		6. (Mailing	Address)	_	_	
East Lansing, M1 4882		East Lansin	g, MI 48823			
		<del>-</del>	<del>\</del>		_	
				<del></del>	<b>~</b>	
				TAL	BZ! ▶	
	Amilia de la compansión					
. Name and street addre	ss of Florida registered agent: (P.O. Box	NOT_acceptable)				
. Name and <u>street addre</u> Name:	ss of Florida registered agent: (P.O. Box  Corporation Service Company	NOT acceptable)		Ü	821 NOV 19 A1	
	_				AH 10: 2	
Name:	Corporation Service Company 1201 Hays Street Tallahassee		32301		AH 10:	
Name:	Corporation Service Company 1201 Hays Street Tallahassee				AH 10: 2	

(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: Name and Address: Title or Capacity: Name: \_\_\_\_\_ Samuel Chappelle Name: □ Manager □Manager 5030 Northwind Drive □Member Address: □ Member Suite 120 Authorized □ Authorized East Lansing, MI 48823 Person Person Other\_\_\_\_ □Other \_\_\_\_ □Other\_\_\_\_\_\_ □Other \_\_\_\_ □Manager Name: \_\_\_\_\_\_ Name: □Manager Address: Address: \_\_\_\_\_ □Member ☐ Member □ Authorized □ Authorized Person Person Other □Other\_\_\_\_\_ □Other\_\_\_\_ □Other\_\_\_\_ Name: \_\_\_\_\_ Name: □Manager □Manager □Member Address: \_\_\_\_\_\_ Address: □Member □ 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. 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. Signature of an authorized person Samuel Chappelle

Typed or printed name of signee



## Department of Licensing and Regulatory Affairs

Lansing, Michigan

This is to Certify That SARNIA HOLDINGS LLC

was validly authorized on January 27, 2021, 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

Linda Clegg, Director

Corporations, Securities & Commercial Licensing Bureau

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 10th day of November, 2021.

Certificate Number: 21110257005