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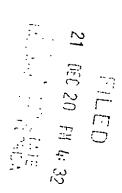
(Requestor's Name)					
(Nequestors (Name)					
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(Audiess)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only



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12/20/21--01034--022 **130.00



T. LEMIEUX

COVER LETTER

SNI United LLC JECT:		
Na	me of Limited Liability Company	
enclosed "Application by Foreign Limited Liabilit stence, and check are submitted to register the abov	y Company for Authorization to Transact Business in Florida," (re-referenced foreign limited liability company to transact business)	
ase return all correspondence concerning this matter	r to the following:	
Linda McMahan		
	Name of Person	
SNI United LLC		
	Firm/Company	
PO Box 1895		
	Address	
Brighton, Mi. 48116		
	City/State and Zip Code	
lmemahan@sixnationsinc.com		
E-mail address: (to	be used for future annual report notification)	
further information concerning this matter, please	cali:	
Steve Foutch	402 5172977	
Name of Contact Person	at () 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 Tailahassee	
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	
	i ananassee, i il 54505	

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:

ix-Nations United LLC					
name unavaitable, enter alternate n	nne adopted for the purpose of transacting business in Flo	orida. The alterna	te name must include "Limited L	iability Company," "L.L.C," or "L	
Michigan			4468542		
(Jurisdiction under the law of which foreign limited liability company is organized)		3	(FEI num	(FEI number, if applicable)	
	(Date liest transacted business in Florida, if prior to (See sections 605.0904 & 605.0905, F.S. to determi	registration.) ne penalty liabilit	у)		
7600 Grand River Rd.	Ste 300	PO 1	Box 1895	21	
reet Address of Principal Office)		0	(Mailing Address)	另一	
Brighton, Mi. 48114		Brig	hton, Mi. 48116	FILE DEC 20	
				-	
Name and street addres	s of Florida registered agent: (P.O. Box	NOT accer	otable)	23	
Name:	Dana Rush		_ 		
Office Address:	792 N Barfield Dr.				
	Marco Island		34145 , Florida		
(Cdy)			(Zip code)		

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: Linda McMahan	■Manager	Name: Alex Hamad
□Member	Address: 7600 Grand River Rd. Ste 300	□Member	Address: 24338 Colgate St
□Authorized	Brighton, Mi 48114	□Authorized	Dearborn Hgts, Mi. 48125
Person		Person	
□Other	Other	□Other	Other
■Manager	Name:	⊆ Manager	Steve Foutch
□Member	Address: 7600 Grand River Rd. Ste 300	□Member	Address: 7600 Grand River Rd. Ste 300
□Authorized	Brighton, Mi 49114	□Authorized	Brighton, Mi 48114
Person		Person	
□Other	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.

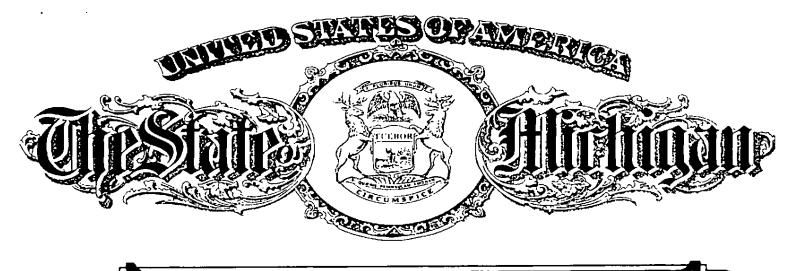
9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must 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 felony as provided for in s.817.155, F.S.

Signature of an authorized person

LINDA MEMAHAN

Typed or printed name of signee



Department of Licensing and Regulatory Affairs

Lansing, Michigan

This is to Certify That SNI UNITED, LLC

was validly authorized on January 22, 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.



Sent by electronic transmission

Certificate Number: 21120471410

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 14th day of December, 2021.

Linda Clega, Director

Corporations, Securities & Commercial Licensing Bureau

Verify this certificate at: URL to eCertificate Verification Search http://www.michigan.gov/corpverifycertificate.



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

Attached are the instructions to register a foreign limited liability company to transact business in Florida. The requirements are as follows:

Pursuant to s. 605,0902, Florida Statutes, the attached application must be completed in its entirety.

The foreign limited liability company must submit 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.

- The name of a limited liability company must be distinguishable on the records of the Florida Department of State. If the name of your limited liability company is not distinguishable on our records, you must adopt an alternative name to use in the state of Florida.
- The name of a limited liability company in the state of Florida must contain the words "Limited Liability Company," The abbreviation "L.L.C.," or the designation "LLC."

A preliminary search for name availability can be made on the Internet through the Division's records at www.sunbiz.org. Preliminary name searches and name reservations are no longer available from the Division of Corporations. You are responsible for any name infringement that may result from your name selection.

The fees to register are as follows:

\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional)

Important Information About the Requirement to File an Annual Report

All Foreign Limited Liability Companies must file an Annual Report yearly to maintain "active" status. The first report is due in the year following formation. The report must be filed electronically online between January 1st and May 1st. The fee for the annual report is \$138.75. After May 1st a \$400 late fee is added to the annual report filing fee. "Annual Report Reminder Notices" are sent to the e-mail address you provide us when you submit this document for filing. To file any time after January 1st, go to our website at www.sunbiz.org. There is no provision to waive the late fee. Be sure to file before May 1st

A letter of acknowledgment will be issued free of charge upon registration. Please submit one check made payable to the Florida Department of State for the total amount of the filing fee and any optional certificate or copy.

A COVER letter should be submitted along with the application, certificate, and check. The mailing address and courier address are noted below.

Any further inquiries concerning this matter should be directed to the Registration Section by calling (850) 245-6051.

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