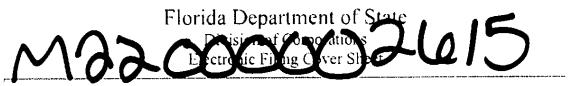
Division of Corporations

Page: 2 of 5

2022-02-16 15:31:07 PST

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From: Kaity Toon



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (954)208-0845 Fax Number : (614)573-3996 Please honor original date

02/11/2022

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

Email Address:

## Foreign Limited Liability Company Bayshore Cottage Grove LLC

Certificate of Status	0
Certified Copy	I
Page Count	04
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K. Brumbley

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

IN COMPLIANCE WITH SECTION 605.0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED HABILITY COMPANY TO TRANSACT BUSINESS. IN THE STATE OF FLORIDA:

iame unavailable, enter alternate r	name adopted for the purpose of transacting business in Flo	arida. The alterna	le name must include "Limited Liabil	ity Company," "E.L.C," or "
Delaware		87-	4497209	
Ourseliction under the law of w	hich foreign limited liability company is organized)	ے	(FEI number,	(Lapplicable)
	(Date first transacted business in Florida, if prior to (See Sections 605 090) & 695 0905, F.S. to determine	registration.)		_
1200 Northwestern H	lighway	312	00 Northwestern Highway	
Address of Principal Office)			(Mading Address)	
armington Hills, MI -	18334	Fart	nington Hills, MI 48334	
		-		
Name and street address	ss of Florida registered agent: (P.O. Box	NOT accep	otable)	CECCE CALLAI
Name and street address Name:	ss of Florida registered agent: (P.O. Box CT Corporation System	NOT accep	nable)	SECRETA SELECTION OF THE PROPERTY OF THE PROPE
,	- · · · · · · · · · · · · · · · · · · ·		otable)	
Name:	CT Corporation System  1200 South Pine Island Road		33324 	CECCE IN PM 3: 57

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.

Stephania Hancz

(Registered agent's signature	)		
By. Stephone Hirry	Assistant Secretary		
C T Corporation System	Otephanic Fichez		

From: Kaity Toon

manage (up to six (6) total):

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
∐Manager	Name: Cottage Grove JV LLC	□ Manager	Name: Ross H. Partrich
	Address: 31200 Northwestern Highway	□ Member	Address: 31200 Northwestern Highway
□ Authorized	Farmington Hitls, MI 48334	<b>■</b> Authorized	Farmington Hills, MI 48334
Person		Person	
Other	Other	[Other	
⊡Manager	Name:	∏ Manager	Name: Katherine L. Hammers
□Member	Address:	□ Member	Address: Honigman LLP
□Authorized		T Authorized	39400 Woodward Ave , Suite 101
Person		Person	Bloomfield Hills, MI 48304
□ Other	Other	_Other	Other
□Manager	Name:	∏Manager	Name:
⊡Member	Address:	∏Member	Address:
☐ Authorized		□ Authorized	
Person	•	Person	
∏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.

Katherine L. Hammers.		
Signature of an authorized person		
Katherine L. Hammers, Authorized Person		

## Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "BAYSHORE COTTAGE GROVE 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 ELEVENTH DAY OF FEBRUARY, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID "BAYSHORE COTTAGE GROVE LLC" IS A SERIES LIMITED LIABILITY COMPANY.

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

at corp.delaware.gov/auth

Authentication: 202642130

Date: 02-11-22