# M24000012548

| (Requestor's Name)                      |  |  |  |  |  |  |
|---|--|--|--|--|--|--|
| (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: |  |  |  |  |  |  |
|   |  |  |  |  |  |  |
|   |  |  |  |  |  |  |
|   |  |  |  |  |  |  |
| W24000127274                            |  |  |  |  |  |  |

Office Use Only

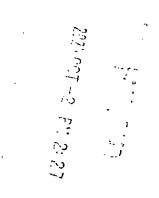


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AUG 26 2024



#### **COVER LETTER**

. . . . . .

| TO:                               | Registration Section Division of Corporations   |   |  |  |  |  |  |
|-----------------------------------|---|---|--|--|--|--|--|
| SUBJ                              | Michigan - Florida Built LEC  |   |  |  |  |  |  |
| Name of Limited Liability Company |   |   |  |  |  |  |  |
|                                   |   | Company for Authorization to Transact Business in Florida." Certificate of referenced foreign limited liability company to transact business in Florida |  |  |  |  |  |
| Please                            | e return all correspondence concerning this matter t  | to the following:   |  |  |  |  |  |
|                                   | Eric Springer   |   |  |  |  |  |  |
|                                   |   | Name of Person  |  |  |  |  |  |
|                                   | Florida Built LLC   |   |  |  |  |  |  |
|                                   | Firm/Company  |   |  |  |  |  |  |
|                                   | 309 E Main Street   |   |  |  |  |  |  |
|                                   | Address   |   |  |  |  |  |  |
|                                   | Lowell, MI 49332  |   |  |  |  |  |  |
|                                   |   | City/State and Zip Code   |  |  |  |  |  |
|                                   | eric@brookstoneinvstment.com  |   |  |  |  |  |  |
|                                   | E-mail address: (to b   | e used for future annual report notification)   |  |  |  |  |  |
| For fu                            | irther information concerning this matter, please ca  | ıil:  |  |  |  |  |  |
| Kevin Schaaf                      |   | 616 822-3014<br>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   |  |  |  |  |  |
|                                   | Tallahassee, FL 32314   | 2415 N. Monroe Street, Suite 810<br>Tallahassee, FL 32303   |  |  |  |  |  |
|                                   | Enclosed is a check for the following amount:  Please make check payable to: FLORIDA DE  \$\Boxed{\Boxes}\$ \$\begin{align*} \$125.00\$ Filing Fee \$\Boxed{\Boxes}\$ \$\$\$ \$130.00\$ Filing Fe |   |  |  |  |  |  |
|                                   | Certificate   | of Status Certified Copy of Status & Certified Copy   |  |  |  |  |  |

### 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 LIABILITY COMPANYTOTRANSACT BUSINESS IN THE STATE OF FLORIDA:

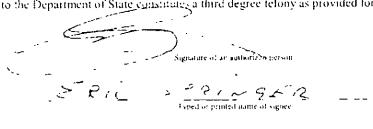
| (Date first transacted business in Florida, if prior to a (See sections 605 0904 & 605 0905, F.S. to determine    | 3   | 9-4334338 (FEI number  | ; if applicable)  |  | -  |
|---|---|--|---|--|--|
|   | egistration.)   | (FEI number  | ; (fapplicable)   |  |  |
| (Date first transacted business in Florida, if prior to to (See sections 605 0904 & 605 0905, F.S. to determine   | egistration.)   |  |   |  |  |
| (Date first transacted business in Florida, if prior to a<br>(See sections 605 0904 & 605 0905, F.S. to determine | egistration.)   |  |   |  |  |
|   | ne penalty hat  | nlity)   | <del></del>   |  |  |
|   |   | 09 E. Main St.   |   |  |  |
| <u> </u>  | 6   | (Mailing Address)  | <del></del>   |  | -  |
|   | Lowell, MI 49331  |  |   |  |  |
|   |   |  |   |  | •  |
|   |   |  |   |  |  |
| C T Corporation System  1200 South Pine Island Road   |   |  | :   | 2924-00T2  |  |
| Plantation  |   | 33324<br>, Florida   | :   | ::<br>:>   |  |
| (Ciry)  |   | (Zip code)   | · ·   | $\sim$   |  |
| gistered agent and to accept service of p   | registere   | ed agent and agree to act in   | this capaci   | pany at th<br>ity. I furti   | her  |
|   | C T Corporation System  1200 South Pine Island Road  Plantation  (City)  tance: gistered agent and to accept service of p | s of Florida registered agent: (P.O. Box NOT acc C T Corporation System  1200 South Pine Island Road  Plantation  (City)  tance: gistered agent and to accept service of process for | S of Florida registered agent: (P.O. Box NOT acceptable)  C T Corporation System  1200 South Pine Island Road  Plantation  (City)  Tance:  Sistered agent and to accept service of process for the above stated limited lie | S of Florida registered agent: (P.O. Box NOT acceptable)  C T Corporation System  1200 South Pine Island Road  Plantation  (City)  (City)  Tance:  Sistered agent and to accept service of process for the above stated limited liability compared to the state of the st | Sof Florida registered agent: (P.O. Box NOT acceptable)  C T Corporation System  1200 South Pine Island Road  Plantation  Florida  (Cip.)  (Cip.)  (Cip.)  (Cip.)  (Cip.)  (Cip.ode) |

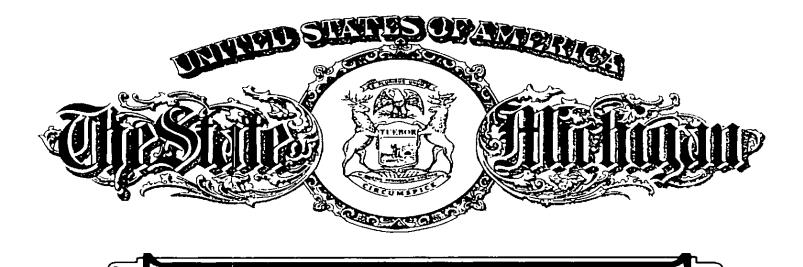
## 8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

| Title or Capacity: | Name and Address:          | Title or Capacity: |            | Name and Address: |
|--------------------|----------------------------|--------------------|------------|-------------------|
| □Manager           | Name: Eric Springer        | □ Manager          | Name:      |                   |
| <b>⊞</b> Member    | 309 E. Main St<br>Address: | □Member            | Address: _ |                   |
| □Authorized        | Lowell, MI 49331           | □Authorized        |            | -                 |
| Person             |                            | Person             |            |                   |
| □Other             | □Other                     | □Other             |            | □Other            |
| □Manager           | Name                       | ∏Managei           | Name:      |                   |
| □Member            | Address:                   | □ Member           | Address:   | <del>-</del> ·    |
| □Authorized        |                            | [] Authorized      |            |                   |
| Person             | - •                        | Person             |            |                   |
| □ Othe:            | □ Other _                  | (20ther            |            | □Other            |
| □Manager           | Name:                      | ∐Manager           | Name:      |                   |
| □Member            | Address.                   | □Member            | Address.   |                   |
| □Authorized        |                            | □Authorized        |            |                   |
| Person             |                            | Person             |            |                   |
| □Other             | ClOthe:                    | □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 faise information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.





#### Lansing, Michigan

Department of Licensing and Regulatory Affairs

This is to Certify That FLORIDA BUILT LLC

was validly authorized on May 31, 2024, 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.

CONTROL A COMMERCIAL PROPERTY OF THE PARTY O

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 16th day of August, 2024.

Certificate Number: 24080382401



Kevin R. Schaaf Attorney (616) 822-3014 kevin@schaaf-law.com

August 16, 2024

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Dear Registration Section,

On behalf of my client, Florida Built LLC, please accept the attached Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida.

If you have any questions about this filing, please contact me directly using the contact information below.

Best regards.

Kevin R. Schaaf Schaaf Law, PLC

kevin@schoof-law.com

The nachary

(616) 822-3014