



State of Rhode Island and Providence Plantations  
**Department of State - Business Services Division**

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 R.I. DEPT. OF STATE  
 BUS. SVCS DIV  
 2017 SEP 29 PM 1:01

**Application for Registration**  
 FOREIGN Limited Liability Company

→ Filing Fee: \$150.00

Pursuant to the provisions of RIGL 7-16-49, the undersigned foreign limited liability company hereby applies for a Certificate of Registration to transact business in the state of Rhode Island, and for that purpose submits the following statement:

1. The name of the limited liability company is:		
<b>IBI Group Michigan LLC</b>		
Is this company organized in its state or country of formation as a low-profit limited liability company? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
The name, if different, under which it proposes to register and transact business in Rhode Island is:		
2. The LLC is organized under the laws of: <b>Michigan</b>		
3. The date of its organization is: <b>2-25-2005</b>		
And the period of its duration is: <b>CHECK ONLY ONE BOX</b>		
<input checked="" type="checkbox"/> Perpetual (on-going)		
<input type="checkbox"/> Date certain for dissolution _____		
4. The name and address of the resident agent/office in Rhode Island is:		
Agent Name <b>Corporate Creations Network Inc.</b>		
Street Address ( <u>NOT</u> a P.O. Box) <b>10 Dorrance Street #700</b>		
City/Town <b>Providence</b>	State <b>RHODE ISLAND</b>	Zip Code <b>02903</b>
5. The Department of State is appointed the agent of the foreign limited liability company for service of process if at any time there is no resident agent or if the resident agent cannot be found or served following the exercise of reasonable diligence.		
6. The address of any office required to be maintained in the state or other jurisdiction under the laws of which the limited liability company is organized is:		
<b>28175 HAGGERTY RD, NOVI, MI 48377</b>		

**MAIL TO:**  
 Division of Business Services  
 148 W. River Street, Providence, Rhode Island 02904-2615  
 Phone: (401) 222-3040  
 Website: www.sos.ri.gov

**FILED** ✓  
 SEP 29 2017 1:01  
 BY CU 313704

7. The mailing address for the limited liability company is:

**55 ST CLAIR AVE W 7TH SL TORONTO ONTARIO M4V 2Y7**

8. Management of the Limited Liability Company:

The limited liability company is managed:

By its members (If you have checked this box, go to Section 9. (DO NOT fill out the chart below.)

By one (1) or more managers (List managers below)

MANAGER	ADDRESS
Lamberto Smigliani	25200 Telegraph Rd. Suite 200, Southfield, MI 48033
James Fox	25200 Telegraph Rd. Suite 200, Southfield, MI 48033
Robert Bartoy	25200 Telegraph Rd. Suite 200, Southfield, MI 48033
Mike Peery	25200 Telegraph Rd. Suite 200, Southfield, MI 48033

9. This application is accompanied by a Certificate of Good Standing/Letter of Status issued by the proper officer of the state or country under the laws of which it is formed that is dated within 60 days of the filing of this document.

10. Date when this application for Certificate of Registration will be effective: **CHECK ONLY ONE BOX**

Date received (Upon filing)

Later effective date (Date must be no more than 30 days from the day of filing) \_\_\_\_\_

*Under penalty of perjury, I declare and affirm that I have examined this Application for Registration, including any accompanying attachments, and that all statements contained herein are true and correct.*

Type or Print Name of LLC

**IBI Group Michigan LLC**

Date

**9/28/2017**

Signature of Authorized Person

By: Karen Montano, Attorney-in-Fact

SIGN DOCUMENT HERE



Please see attached page

**MANAGER****ADDRESS****Carl-Henry Piel****25200 Telegraph Rd. Suite 200, Southfield, MI 48033****Paul Lavalee****25200 Telegraph Rd. Suite 200, Southfield, MI 48033****Bart Cima****25200 Telegraph Rd. Suite 200, Southfield, MI 48033****Moze Ebrahina****25200 Telegraph Rd. Suite 200, Southfield, MI 48033**

Limited Power of Attorney

The undersigned IBI Group Michigan LLC, a Delaware entity ("the Company"), appoints Karen Montano as attorney-in-fact(s) for the Company and its subsidiaries for the limited purposes authorized in this Limited Power of Attorney. Danielle Gossman, Special Manager grants to the attorney-in-fact the power to execute the documents necessary to change the registered agent, change of address, amendments, fictitious name registrations, fictitious name renewals, qualifications, annual reports, amended annual reports, initial reports, obtain tax clearance/compliance certificate(s), withdraw, dissolve, reinstate, convert or form the Company and its subsidiaries. The named individuals shall act in such office and with such authority as is required to effect the changes contemplated in this Limited Power of Attorney.

This Limited Power of Attorney expires on the earlier of (a) the filing of change of registered agents and/or change of address and/or amendments and/or fictitious name registrations and/or fictitious name renewals and/or qualifications and/or annual reports and/or amended annual reports and/or initial reports and/or withdraw and/or dissolve and/or formations and/or reinstate for the Company and its subsidiaries or (b) six months after the Effective Date set forth below. The Company may revoke this Power of Attorney at any time by written notice to Corporate Creations Network Inc., 11380 Prosperity Farms Road #221E, Palm Beach Gardens, FL 33410.

The undersigned has executed this Limited Power of Attorney effective as of this 28th day of September 2017.

IBI Group Michigan LLC

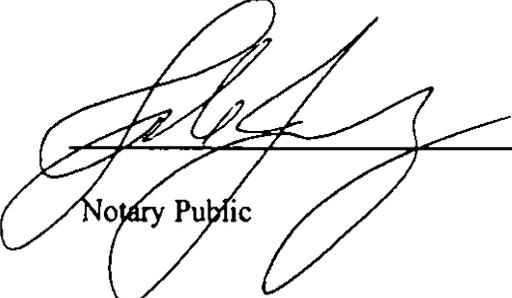
By:  \_\_\_\_\_

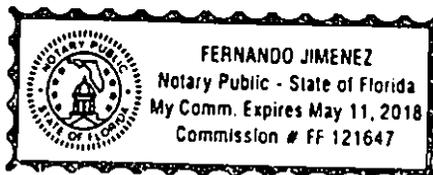
Name: Danielle Gossman

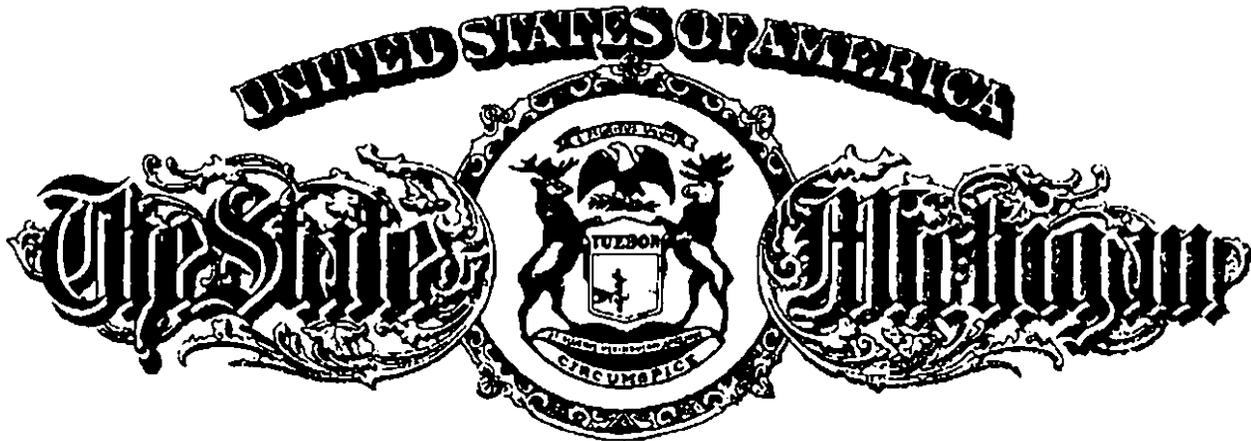
Title: Special Manager

STATE OF FLORIDA  
COUNTY OF PALM BEACH

Subscribed and sworn to before me this 28th day of September 2017.

  
\_\_\_\_\_  
Notary Public





**Department of Licensing and Regulatory Affairs**  
Lansing, Michigan

*This is to Certify That*

**IBI GROUP MICHIGAN, LLC**

*was validly organized on February 25, 2005 as a Limited Liability Company. 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, as amended, 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 Facsimile Transmission  
1469627

*In testimony whereof, I have hereunto set my hand,  
in the City of Lansing, this 28th day of September, 2017*

*Julia Dale*

Julia Dale, Director  
Corporations, Securities & Commercial Licensing Bureau



State of Rhode Island and Providence Plantations  
**Department of State | Office of the Secretary of State**  
**Nellie M. Gorbea**, *Secretary of State*

I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island  
and Providence Plantations, hereby certify that this document, duly executed in  
accordance with the provisions of Title 7 of the General Laws of Rhode Island, as  
amended, has been filed in this office on this day:

September 29, 2017 01:01 PM

A handwritten signature in blue ink, appearing to read "Nellie M. Gorbea". The signature is fluid and cursive, written in a professional style.

Nellie M. Gorbea  
*Secretary of State*

