

LARA Corporations
Online Filing System
Department of Licensing and Regulatory Affairs

Form Revision Date 02/2021

APPLICATION FOR CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN MICHIGAN

For use by a FOREIGN LIMITED LIABILITY COMPANY

Pursuant to the provisions of Act 23, Public Acts of 1993, the undersigned execute the following Application:

1. The name of the limited liability company is:

ZIPPY INSURANCE SERVICES, LLC

2. (Complete this item only if the limited liability company name in item 1 is not available for use in Michigan.)

The assumed name of the limited liability company to be used in all its dealings with the Bureau and in the transaction of its business in Michigan is:

3a. It is organized under the laws of:

Country: USA - United States

State: DE - Delaware

3b. The date of its organization is: 07/26/2021

4. The duration of the limited liability company if other than perpetual is:

PERPETUAL

5. The address of the office required to be maintained in the state of organization or, if not so required, the principal office of the limited liability company is:

Street Address: 2807 ALLEN STREET, SUITE 335

Apt/Suite/Other:

City: DALLAS

Country:

Zip Code: 75204

State: TX

6. The Street address of the registered office of the limited liability company and the name of the resident agent at the registered office (P.O. Boxes are not acceptable):

a. Resident Agent Name: CAPITOL CORPORATE SERVICES, INC.

b. Street Address: 186 N. MAIN STREET, 2ND FLOOR, SUITE 1

Apt/Suite/Other:

City: PLYMOUTH

State: MI

Zip Code: 48170

c. Registered Office Mailing Address:

P.O. Box or Street Address: 186 N. MAIN STREET, 2ND FLOOR, SUITE 1

Apt/Suite/Other:

City: PLYMOUTH

State: MI

Zip Code: 48170

8. The Department is appointed the agent of the foreign limited liability company for service of process if no agent has been appointed, or if appointed, the agent's authority has been revoked, the agent has resigned, or the agent cannot be found or served through the

exercise of reasonable diligence.

The name and address of a member or manager or other person to whom the administrator is to send copies of any process served on the administrator is: (Must be different than the resident agent)

Name: ROBERT JORDAN BUCY
Street Address: 2807 ALLEN STREET, SUITE 335
Address 2 :
City : DALLAS
Country : United States Zip Code: 75204
State: TX

9. The specific business which the limited liability company is to transact in Michigan is as follows:

MANUFACTURED HOME INSURANCE SERVICES.

The document shall be signed by a person with the authority to do so under the laws of the jurisdiction or its organization.

Signed this 4th Day of May, 2022 by:

Signature	Title	Title if "Other" was selected
Robert Jordan Bucy	Other	President

By selecting ACCEPT, I hereby acknowledge that this electronic document is being signed in accordance with the Act. I further certify that to the best of my knowledge the information provided is true, accurate, and in compliance with the Act.

Decline Accept

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ZIPPY INSURANCE SERVICES, 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 FOURTH DAY OF MAY, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ZIPPY INSURANCE SERVICES, LLC" WAS FORMED ON THE TWENTY-SIXTH DAY OF JULY, A.D. 2021.

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




Jeffrey W. Bullock, Secretary of State

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SR# 20221772187

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 203341795

Date: 05-04-22

MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS

FILING ENDORSEMENT

This is to Certify that the APPLICATION FOR CERTIFICATE OF AUTHORITY TO
TRANSACTION BUSINESS IN MICHIGAN
for

ZIPPY INSURANCE SERVICES, LLC

ID Number: 802853655

received by electronic transmission on May 04, 2022 ***, is hereby endorsed.***

Filed on May 04, 2022 ***, by the Administrator.***

The document is effective on the date filed, unless a subsequent effective date within 90 days after received date is stated in the document.

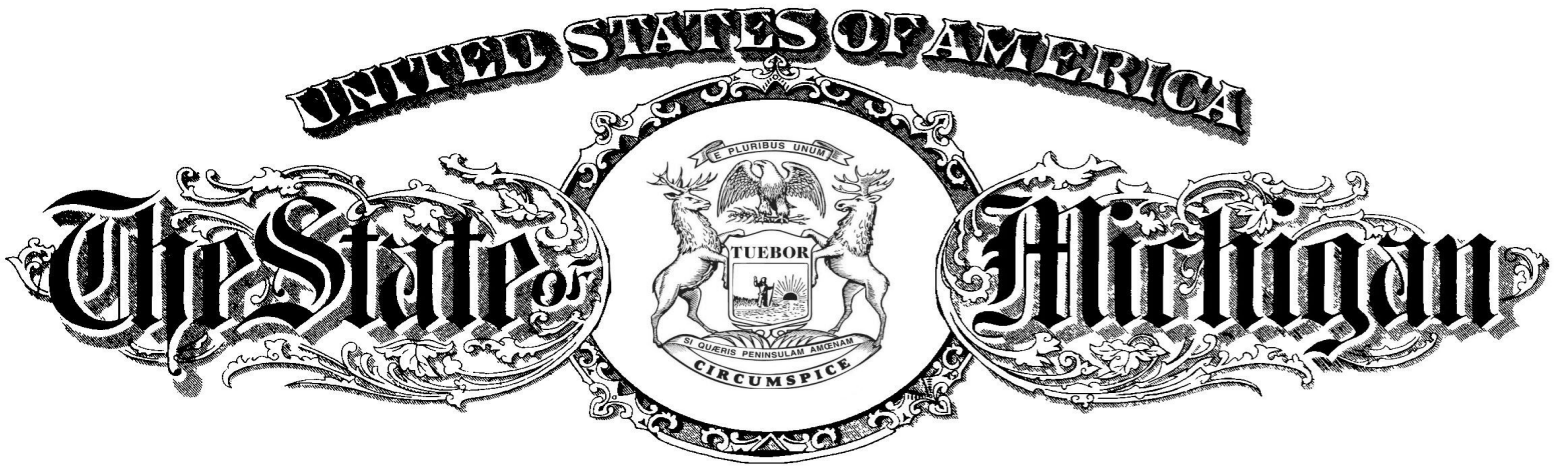


In testimony whereof, I have hereunto set my hand and affixed the Seal of the Department, in the City of Lansing, this 4th day of May, 2022.

Linda Clegg

Linda Clegg, Director

Corporations, Securities & Commercial Licensing Bureau



Lansing, Michigan

This is to Certify That

ZIPPY INSURANCE SERVICES, LLC

a FOREIGN LIMITED LIABILITY COMPANY existing under the laws of the state of Delaware

was validly authorized to transact business in Michigan on the 4th day of May, 2022,
in conformity with 1993 PA 23.

Said company is authorized to transact in this state any business of the character set forth in its application which a domestic company formed under this act may lawfully conduct. The authority shall continue as long as the company retains its authority to transact such business in the jurisdiction of its organization, its authority to transact business in this state has not been suspended or revoked, and the company has not surrendered its authority to transact business in this state.

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.



In testimony whereof, I have hereunto set my hand,
in the City of Lansing, this 4th day of May, 2022.

Linda Clegg, Director

Corporations, Securities & Commercial Licensing Bureau