

**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:

LINEAL 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: TX - Texas

3b. The date of its organization is: 12/12/2019

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

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: 14605 NW 73RD STREET  
Apt/Suite/Other:  
City: PARKVILLE  
Country:  Zip Code: 64152  
State: MO

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: C T CORPORATION SYSTEM  
b. Street Address: 40600 ANN ARBOR RD, E  
Apt/Suite/Other: STE 201  
City: PLYMOUTH  
State: MI Zip Code: 48170-4675

c. Registered Office Mailing Address:

P.O. Box or Street  
Address:  
Apt/Suite/Other:  
City:  
State: Zip Code:

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liability company for service of process if no agent has been appointed, or if appointed, the agent's authority has been revoked, the agent has resigned, or the agent cannot be found or served through the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: PAUL ROWLETT  
Street Address: 14605 NW 73RD STREET  
Address 2 :  
City : PARKVILLE  
Country : United States  Zip Code: 64152  
State: MO

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

LEGAL TECHNOLOGY 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 16th Day of October, 2023 by:

Signature	Title	Title if "Other" was selected
PAUL ROWLETT	Manager	

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



## Office of the Secretary of State

### Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Lineal Services, LLC (file number 803492911), a Domestic Limited Liability Company (LLC), was filed in this office on December 12, 2019.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on October 04, 2023.



A handwritten signature in black ink that reads "Jane Nelson".

Jane Nelson  
Secretary of State

**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***

LINEAL SERVICES, LLC

***ID Number:*** 803109682

***received by electronic transmission on*** October 16, 2023 ***, is hereby endorsed.***

***Filed on*** October 16, 2023 ***, 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.***

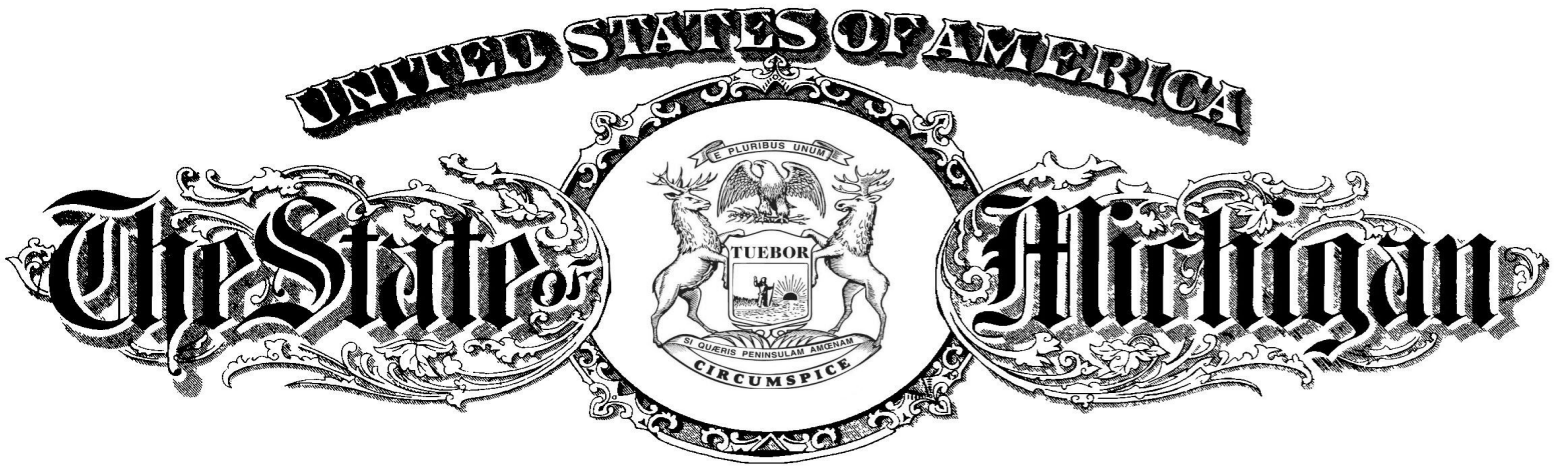


***In testimony whereof, I have hereunto set my hand and affixed the Seal of the Department, in the City of Lansing, this 16th day of October, 2023.***

*Linda Clegg*

***Linda Clegg, Director***

***Corporations, Securities & Commercial Licensing Bureau***



Lansing, Michigan

*This is to Certify That*

**LINEAL SERVICES, LLC**

*a FOREIGN LIMITED LIABILITY COMPANY existing under the laws of the state of Texas*

*was validly authorized to transact business in Michigan on the 16th day of October, 2023, 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 16th day of October, 2023.*

Linda Clegg, Director

Corporations, Securities & Commercial Licensing Bureau