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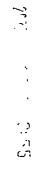
(Requesto	or's Name)
(Address)	
(Address)	
(City/State	e/Zip/Phone #)
PICK-UP	WAIT MAIL
(Business	Entity Name)
(Documen	it Number)
Certified Copies	Certificates of Status
Special Instructions to Filing (Officer:
	ļ





700416347787

09/26/23--01049--001 ++130.00





COVER LETTER

TO:	Registration Section Division of Corporations			
SUBJE	Haven Lodging, LLC CT:			
., .,	Nam	e 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 r	eturn all correspondence concerning this matter t	to the following:		
	Julia McKinney			
		Name of Person		
	Haven Lodging, LLC			
	Firm/Company			
	2600 Aubum Road, Suite 240			
	Address			
	Auburn Hills, MI 48326			
		City/State and Zip Code		
	julia@mwlodging.com			
	E-mail address: (10 b	e used for future annual report notification)		
For furt	her information concerning this matter, please ca	HI:		
	Julia McKinney	248 419-5554 at ()		
	Name of Contact Person	Area Code Daytime Telephone Number		
Mailing Address: Registration Section		Street Address: Registration Section		
Division of Corporations P.O. Box 6327		Division of Corporations		
		The Centre of Tallahassee		
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		
	Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEI ☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fe Certificate of	ee & 🔲 \$155.00 Filing Fee & 🔲 \$160.00 Filing Fee, Certificate		

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 FOREKIN TIMITED HABITITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

ili name unavaslable, enter alternate	name adopted for the purpose of transacting business in Fl	orada, The	alternate name must include "Earnied Liability Company," "L	LC,TarTLLCT
Michigan		,	93-2384369	
(Jurustienon under the law of v	hich foreign limsted liability company is organized)	э.	(FEI number, if applicable)	
4				
	(Date first transacted business in Florida, if prior to (See sections 605 0904 & 605 0905, F.S. to determine	registration no penalty	a) Isabelity)	-
2600 Auburn Road		6.	2600 Auburn Road	
5. (Street Address of Principal Office)		0.	(Mailing Address)	
Suite 240			Suite 240	·· ·
Auburn Hills, MI 483	26		Auburn Hills, 48326	
7. Name and street addre	ss of Florida registered agent: (P.O. Box	NOT.	acceptable)	: ر ن
Name:	Fady Asmar	;		
	7801 7901 S.W. 6th Street			
Office Address:	Plantation		33324	

Registered agent's acceptance:

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.

- July - Aman (Regulated spend's signaluse)

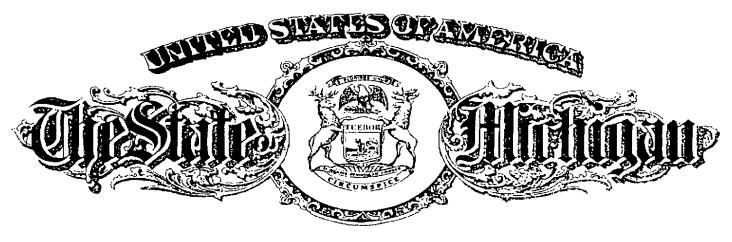
8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to

<u>fitle or Capacity:</u>	Name and Address:	Title or Capacity:	Name and Address
■ Manager	Name: Malik Abdulnoor	■Manager	Name: Sahir Malki
□Member	Address: 2600 Aubum Road, Suite 240	□Member	Address: 4700 Lasher Road
□Authorized	Auburn Hills, MI 48326	□Authorized	Bloomfield Hills, MI 48302
Person		Person	
□Other	□Other	□Other	□Other
⊒Manager	Name:	□Manager	Name:
∃Member	Address:	□Member	Address:
∃Authorized		□Authorized	
Person		Person	
Other	Other	□Other	Other
∃Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	
□Other	□Other	□Other	

of the translator must be submitted)

10. This document is executed in accordance with section 605,0203 (1) (b). Biorida Statutes, I am aware that any false information submitted in a document to the Department of State constitutes a third dogree telony as provided for in s.817.155, F.S.

Signature of an authorized person Malik Abdulnoor Typed or printed name of signee



Department of Licensing and Regulatory Affairs

Lansing, Michigan

This is to Certify That

HAVEN LODGING, LLC

was validly authorized on July 17, 2023, 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



Sent by electronic transmission

Certificate Number: 23090463104

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 22nd day of September, 2023.

Linda Clegg, Director

Corporations. Securities & Commercial Licensing Bureau