

L02000000 7722
CT CORPORATION

CORPORATION(S) NAME

Yellow Bluff Group LLC

FILED

02 APR -1 PM 4:05 RECEIVED

SECRETARY OF STATE
TALLAHASSEE, FL 32301
02 APR -1 PM 12:53

DEPARTMENT OF REVENUE
DIVISION OF CORPORATE REVENUE
TALLAHASSEE, FL 32301

☐ Profit	☐ Amendment	☐ Merger
☐ Nonprofit		
☐ Foreign	☐ Dissolution/Withdrawal	☐ Mark
	☐ Reinstatement	
☐ Limited Partnership	☐ Annual Report	☐ Other
☒ LLC	☐ Name Registration	☐ Change of RA
	☐ Fictitious Name	☐ UCC
☐ Certified Copy	☐ Photocopies	☐ CUS
☐ Call When Ready	☐ Call If Problem	☐ After 4:30
☒ Walk In	☐ Will Wait	☒ Pick Up
☐ Mail Out		

Name	Name
Availability	Availability
Document	Document
Examiner	Examiner DCC
Updater	Updater DCC
Verifier	Verifier
W.P. Verifier	W.P. Verifier DCC
no judgement	DCC

4/1/02

Order#: 5242157

kf

Ref#:

600005180086--4

-04/01/02--01040--018

Amount: \$ ****125.00 ****125.00

W. P. Verifier
660 East Jefferson Street
Tallahassee, FL 32301
Tel. 850 222 1092
Fax 850 222 7615

L02000000 7722

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I - Name:**

The name of the Limited Liability Company is: **Yellow Bluff Group LLC**

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

45000 River Ridge Drive, Suite 200

Clinton Township, MI 48038

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

CT Corporation

Name

1200 South Pine Island Road

Florida street address (P.O. Box NOT acceptable)

Plantation FL 33324

City, State, and Zip

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 certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

PETER F. SOUZA

ASSISTANT SECRETARY

Registered Agent's Signature

02 APR - 1 PM 4:14
TALLAHASSEE, FLORIDA

FILED

SIGN
HERE

Article IV - Management (Check box if applicable.)

- ☒ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

[Signature]
Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Michael J. Catenacci, Manager

Typed or printed name of signee

Filing Fees:

- \$100.00 Filing Fee for Articles of Organization
- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

TOTAL P.02