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DIVISION OF CORPORATIONS
STATE OF NEW YORK

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DEARBORN INVESTMENT GROUP, LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MICHAEL J. CHRISTOFF
(Name of Person)

DEARBORN INVESTMENT GROUP, LLC
(Firm/Company)

8335 WHISPER TRACE WAY, UNIT G102
(Address)

NAPLES, FL 34114
(City/State and Zip Code)

For further information concerning this matter, please call:

MICHAEL J. CHRISTOFF at (239) 530-7034
(Name of Person) (Area Code & Daytime Telephone Number)

04 AUG -5 PM 2:11
SECRETARY OF STATE
DIVISION OF CORPORATIONS

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

DEARBORN INVESTMENT GROUP, LLC

ARTICLE II - Address:

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

Principal Office Address:

8335 WHISPER TRACE WAY

UNIT G102

NAPLES, FL 34114

Mailing Address:

8335 WHISPER TRACE WAY

UNIT G102

NAPLES, FL 34114

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

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

MICHAEL J. CHRISTOFF

Name


8335 WHISPER TRACE WAY, UNIT G102

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

NAPLES FLORIDA 34114

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, Florida Statutes..



Registered Agent's Signature

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
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ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

MICHAEL J. CHRISTOFF
8335 WHISPER TRACE WAY UNIT 6102
NAPLES, FL 34114

MGRM

ROBERT POPOFF
146 GREENBRIER ST.
MARCO ISLAND, FL 34145

MGRM

FRANK GAJOR
18504 BLUE SKIES CT.
LIVONIA, MI 48152

MGRM

JOHN GAJOR
3837 BRIAR PATCH LN.
GALESBURG, MI 49053

(Use attachment if necessary)

→ SEE ATTACHED

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:


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

(In accordance with section 608.406(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. CHRISTOFF
Typed or printed name of signer

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
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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)

ARTICLE IV- Manager(s) or Managing Member(s): (CONT)
 The name and address of each Manager or Managing Member is as follows:

Title:
 "MGR" = Manager
 "MGRM" = Managing Member

Name and Address:

MGRM

JOHN L. GROSS
9265 APPLE CREST DR.
SALINE, MI 48176

(Use attachment if necessary)

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 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

NOTE: An additional article must be added if an effective date is requested

REQUIRED SIGNATURE:

~~Signature of a member or an authorized representative of a member~~

~~(In accordance with section 605.106(5), Florida Statutes, the execution of this document constitutes an affirmation and acceptance of liability for the contents hereof.)~~

~~Signature of Secretary~~

- Filing Fees:**
 \$200.00 Filing Fee for Articles of Organization
 \$25.00 Dues of Registered Agent
 \$30.00 Certified Copy (Optional)
 \$100.00 Certificate of Status (Optional)