

L100001043983

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H10000104398 3)))



H100001043983ABC-

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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : RACHEL SIU
Account Number : I20010000073
Phone : (407) 679-2433
Fax Number : (407) 671-4352

**Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please.

Email Address: _____

FLORIDA LIMITED LIABILITY CO.
Michigan Park, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
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10 APR 30 AM 17
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TALLAHASSEE, FLORIDA

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10 APR 30 AM 6:29
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D. BRUCE
MAY - 3 2010
EXAMINER

04/30/2010 16:03 FAX 4076714352
850-617-6381

FOI-SIU
4/30/2010 9:42:41 AM PAGE 1/001 Fax Server 002/005



April 30, 2010

FLORIDA DEPARTMENT OF STATE
Division of Corporations

RACHEL SIU

SUBJECT: MICHIGAN PARK, LLC
REF: W10000020965

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Please list the complete principal office address.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6984.

Deborah Bruce
Regulatory Specialist II

FAX Aud. #: H10000104398
Letter Number: 510A00010742

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TALLAHASSEE, FLORIDA

04/30/2010 16:03 FAX 4076714352

FOX-SIU

003/005

Filed 4/29/10

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Michigan Park, 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:

Rachel Siu

Name of Person

Siu & Zanowick, CPAs

Firm/Company

5100 Old Howell Branch Road

Address

Winter Park, FL 32792

City/State and Zip Code

RachelCPA@embarqmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rachel Siu

Name of Person

at (407)

679-2433

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|---|
| <input checked="" type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee & Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee & Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$160.00 Filing Fee, Certificate of Status & Certified Copy
(additional copy is enclosed) |
|---|--|--|---|

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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TALLAHASSEE, FLORIDA

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

The name of the Limited Liability Company is:

Michigan Park, LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:**Mailing Address:**Mustang Nguyen12420 N. Florida Ave12420 N Florida AveTampa, FL 33612Tampa FL 33612**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or a business entity with an active Florida registration.)

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

Mustang Nguyen

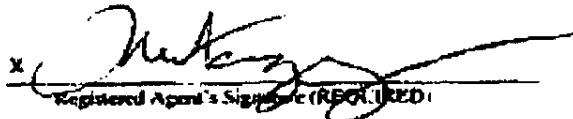
Name

12420 N. Florida AveFlorida street address (P.O. Box **NOT** acceptable)Tampa, FL 33612

FL

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 60E, F.S.

x 
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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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

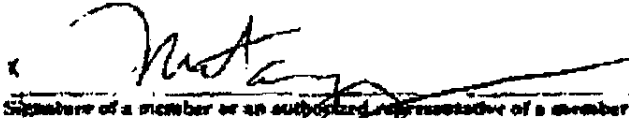
"MGRM" = Managing Member

Name and Address:MGRMustang Nguyen2221 Wandering Oak TerraceKissimmee, FL 34746MGRNancy Nguyen2221 Wandering Oak TerraceKissimmee, FL 34746MGRMVictor Nguyen2221 Wandering Oak TerraceKissimmee, FL 34746MGRMNewton Nguyen2221 Wandering Oak TerraceKissimmee, FL 34746

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED 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.)

Mustang Nguyen

Typed or printed name of signer

Filing Fees:\$125.00 Filing Fee for Articles of Organization and Designation
of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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