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D. BRUCE

DEC. 11 2012

EXAMINER

COVER LETTER

	ation Section of Corporations		
SUBJECT: A	E Power Group, LLC	•	
		ed Liability Company	
The enclosed Arti	cles of Organization and fee(s) are	submitted for filing.	
Please return all c	orrespondence concerning this matt	er to the following:	
Elmer	L. Roller, Esq.	N CD	
		Name of Person	
Elmer	L. Roller, P. C.		
		Firm/Company	
1760	S. Telegraph Road, S	Suite 300	
** **** ******************************	<u> </u>	Address	
Plaamfi	iold Hillo Michigan 40	202	
DIOOHII	ield Hills, Michigan, 48	JUZ //State and Zip Code	
eroller0	07@aol.com	route and 25p code	ALL SEC
0.0.0.0		or future annual report notification)	<u> </u>
For further inform	ation concerning this matter, please	call:	DEC ID
Elmar Dallan		0.40	me I
Elmer Roller	Name of Person	at (248) 335-5000 Area Code & Daytime Telepho	one Number
	vame of reison	Area Code & Daytime Telepho	one Number
Enclosed is a che	eck for the following amount:		
√]\$125.00 Filing Fe	e \$\int_\$130.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	S160.00 Filing Fee, Certificate of Status & Certified Copy additional copy is enclosed)
1	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 Circ Tallahassee, FL 32301	le

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A	DT	T.	I _	Nam	۵.
~	K I	 , P.	-	Nam	

The name of the Limited Liability Company is:

Δ	F	POWA	r Group	I	ı	$\overline{}$
$\boldsymbol{\wedge}$	\mathbf{L}	LOME	i Gioub	. L		U

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

ARTICLE II - Address:

Principal Office Address:

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

Mailing Address:

Elmer Roller, Esq.	Donald Day		
1760 S. Telegraph Road, Suite 300	76 Kercheval		
Bloomfield Hills, Michigan 48302	Grosse Pointe farms, Michigan 48236		
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Registers business entity with an active Florida registration.) The name and the Florida street address of the Northwest Registered Nam 3030 N. Rocky Po	e registered agent are: d Agent LLC ne control of the Control o		
	address (P.O. Box NOT acceptable)		
Tampa	_{FL} 33607		
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..

Dan Keen-Manager

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2



ARTICLE IV- Manager(s) or Managing Member(s):

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

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Mem	ber
MGR	Donald Day
	76 Kercheval
	Grosse Pointe Farms, Michigan 48236
MGRM	Elmer Roller
	1760 S. Telegraph Road, suite 300
	Bloomfield Hills, Michigan 48302
MGRM	Jay Yasso
	1760 S. Telegraph Road, Suite 300
	Bloomfield Hills, Michigan 48302
(Use attachment if necessary)
ARTICLE V: Effective date, if other	than the date of filing: January 1, 2013 (OPTIONAL)
	e must be specific and cannot be more than five business days prior
REQUIRED SIGNATURE	: :
	Augusta August
3	22 D
Signature of	a member or an authorized representative of a member.
(In accordance with se constitutes an affirma	ection 608.408(3), Florida Statutes, the execution of this document
I am aware that any fa	alse information submitted in a document to the Department of State.
Elmer	Poller Sp 1. C

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)

Typed or printed name of signee