Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850) 222-1092 Fax Number : (850)878-5368

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

Email Address:



FLORIDA LIMITED LIABILITY CO.

Anderson Parkview Investors, LLC

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Page Count	04
Estimated Charge	\$125.00

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Corporate Filing Menu

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T HAMPTON

COVER LETTER

TO:	Registration Division of C			
SUBJE	CT: Anderso	n Parkview Investors, LLC Name of Lin	nited Liability Company	
The enc	losed Articles	of Organization and fee(s) ar	e submitted for filing.	
Please re	cturn all corres	spondence concerning this ma	atter to the following:	
		I	Bernadette M. Dennehy Name of Person	
			Name of Person	
		1	Dickinson Wright PLLC	
			Firm/Company	
		500	Woodward Ave., Suite 4000	
			Address	
			Detroit, MI 48226	
			ity/State and Zip Code	
_		E-mail address: (to be use	hy@dickinson-wright.com d for future annual report notifica	tion)
f or furt	her informatio	n concerning this matter, plea	ase call:	
Thoma	s Munzenberg	eral (3(3) 223-3767	
المنتوسير : .	Nan	ne of Person	Area Code Daytime Te	lephone Number
Enclose	d is a check fo	or the following amount:		
□ S125.04	0 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:		
Anderson Parkview Investors, LLC (Must end with the words "Limited Lie	ability Company, "L.L.C.," or "LLC	
ARTICLE II - Address: The mailing address and street address of the principal office	e of the Limited Liability Company	is:
Principal Office Address:	Mailing Address:	
	121 W. Long Lake Rd., 3rd Floor Bloomfield Hills, MI 48304	
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own Reanother business entity with an active Florida registration.)	gistered Agent. You must designate	an individual or
The name and the Florida street address of the registered ag	ent are:	
C T Corporation Name 1200 South Pine Is	sland Road	
Florida street address (P.O. Box N		
Plantation City	FL 33324 Zip	
•	he appointment as registered agent ar all statutes relating to the proper and ations of my position as registered ag 605, F.S.	nd agree to act in this complete performance eent as provided for in
C T Corporation System By: Coming Bonda	(((())) (()) (()) (()) (()) (())	
Registered Agent's Signatur	re (REQUIRED)	۴.
(CONTINUE)	D)	14 N SEC TALL

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FILED

14 NOV -7 AM 7: 05

SECRETARY OF STATE
ACCEPTAGE FLORIDA

<u>fitte:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" - Manager	
MGR	The Anderson Group, LLC
	121 W. Long Lake Rd., 3rd Floor
	Hloomfield Hills, MJ 48304
•	
E.V.: Effective date, of other than the date of	Cilling
rective date is listed, the date must be spec of filing.)	t filing
LE V: Unfective date, (finities than the date of fective date is listed, the date must be special filing.) LE VI: Other provisions, (finition)	The and cannot be more than five business days prior to or
EV: Unfective date, if other than the date of fective date is listed, the date must be special filing.) EVI: Other provisions, if any REQUIRED SIGNATURE:	adtle Denne Ry
EV: Unfective date, of other than the date of fective date is listed, the date must be special filing.) EVI: Other provisions, of any REOUIRED SIGNATURE: Signature of a mention accordance with section 605 constitutes an affirmation under I am aware that any folse inform	The and cannot be more than five business days prior to or
EV: Unfective date, if other than the date of fertive date is listed, the date must be special filing.) EVI: Other provisions, if any REOUIRED SIGNATURE: Signature of a ment the accordance with section 605 constitutes an affirmation under I am aware that any folse inform constitutes a third degree felony	the and cannot be more than the business diffs prior to or the cannot be more than the business diffs prior to or an authorized representative of a member. 0203 (1) (b), Florida Stances, the execution of this document the penalties of perjury that the facts stated herein are true, attion submitted in a document to the Department of State

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\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)

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