Division of Corporations Electronic Filing Cover Sheet

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.

(((H14000271370 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA00000023 Phone : (850)222-1092 : (850)878-5368 Fax Number

\*\*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 Locker Investors, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

NOV 2 4 2014

T. HAMPTON

## COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJE	CT: Anderson Locker Investors, J.I.C Name of Lim	ited Liability Company	
The one	closed Articles of Organization and fee(s) are	e subnitted for filing.	•
Please r	return all correspondence concerning this ma	nter to the following:	
		Bernadette M. Dennehy Name of Person	
		Dickinson Wright PLUC Firm/Company	
	500 \	Nuodward Ave., Suite 4000 Address	
	C	Detroit, MI 48226 ity/State and Zip Code	<del></del>
	BDenne Fmail address: (to be used	hy@dickinson-wright.com i for future annual report notifica	tion)
For fur	ther information concerning this matter, plea	se call:	
<u>Thoma</u>	Name of Person at ( 3	Area Code Daytime Tol	ephone Number
Enclose	ed is a check for the following amount:		
□ \$125.0	O Filing Fee S130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐\$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 Adds Registration Section Division of Corporat Clifton Building 2661 Executive Cent Tallahussee, F1, 3230	ions er Circle

1. M. College Weeks Known Online

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
,	
Anderson Locker Investors, CLC	
(Must end with the words "Lim	ited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of the princip	al office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
121 W. Long Lake Rd., 3rd Floor Bloomfield Hills, MJ 48304	121 W. Lang Lake Rd., 3rd Floor Bloomfield Hills, MI 48304
ARTICLE III - Registered Agent, Registered Off (The Limited Liability Company cannot serve as its another business emity with an active Florida regist	own Registered Agent. You must designate an individual or
The name and the Florida street address of the regist	ered agent are:
	oration System
	ame
	Pine Island Road
Florida street address (P.O.	Box NOT acceptable)
Plantation	<u>FL 33324</u>
City	Zip

Having been named as registered agent and to accept service of process for the above stated limited hability 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 605, F.S..

CT Corporation System

By: Likea Fall Rebecca Barth

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

SECRETARY OF STATE

and the transport of a secretor becomes received

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manage*	
MGR	The Anderson Group, LLC
	121 W. Long Lake Rd., 3rd Floor Bloomfield Hills, Mt 48304
	DISSURANCE THAT THE AUGUST
	·
and the search of the search of	
ective date is listed, the date must be s	ite of filing:
E.V.: Effective date, if other than the datective date is listed, the date must be sof filing.)  E.V.I.: Other provisions, if any.	specific and connot be more than five business days prior to or 90
E V: Effective date, if other than the datective date is listed, the date must be sof filing.)  E VI: Other provisions, if any.	nte of filing:
E V: Effective date, if other than the datective date is listed, the date must be sof filing.)  E VI: Other provisions, if any.	specific and connot be more than five business days prior to or 90
E V: Effective data, if other than the datective date is listed, the date must be sof filing.)  E VI: Other provisions, if any.  REQUIRED SIGNATURE:	specific and cannot be more than five business days prior to or 90
E V: Effective date, if other than the datective date is listed, the date must be sof filing.)  E VI: Other provisions, if any.  REOURED SIGNATURE:  Signature of n of the date must be soft and the soft of the s	nomber of an authorized representative of a member.
E V: Effective date, if other than the datective date is listed, the date must be sof filing.)  E VI: Other provisions, if any.  REOUIRED SIGNATURE:  Signature of n r  (In accordance with section of constitutes an affirmation in	nomber of an authorized representative of a member.  645.0203.(1) (b), Florida Statutes, the execution of this document der tile penaltics of perjury that the facts stated herein are true.
EV: Effective date, if other than the datective date is listed, the date must be sof filing.)  EVI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a region of the constitutes an affirmation in I am aware that any false infe	nomber of an authorized representative of a member.
EV: Effective date, if other than the datective date is listed, the date must be sof filing.)  EVI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a region of the constitutes an affirmation in I am aware that any false infe	noniber of an authorized representative of a member. 645,0203, 1) (b), Florida Statutes, the execution of this document der tile penalties of perjury that the facts stated herein are true, formation submitted in a document to the Department of State only as provided for in 8.817.155, F.S.)
EV: Effective date, if other than the datective date is listed, the date must be sof filing.)  EVI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a region of the constitutes an affirmation in I am aware that any false infe	nomber of an authorized representative of a member.  der the penalties of perjury that the facts stated herein are true.  formation submitted in a document to the Department of State
E V: Effective date, if other than the datective date is listed, the date must be sof filing.)  E VI: Other provisions, if any.  REOUIRED SIGNATURE:  Signature of a reconstitutes an affirmation in I am aware that any false infe	moniber of an authorized representative of a member. 645.0203.1) (b), Florida Statutes, the execution of this document der the penaltics of perjury that the facts stated herein are true. formation submitted in a document to the Department of State only as provided for in s.817.155, F.S.)  John M. Perkins Typed or printed name of signee
EV: Effective date, if other than the datective date is listed, the date must be sof filing.)  EVI: Other provisions, if any.  REOURED SIGNATURE:  Signature of a regular constitutes an affirmation in I am aware that any false inficunstitutes a third degree felicities.	notiber of an authorized representative of a member.  def in penalties of perjury that the facts stated herein are true.  formation submitted in a document to the Department of State ony as provided for in s.817.155, F.S.)  John M. Perkins  Typed or printed name of signee  Filling Fees:
EV: Effective date, if other than the datective date is listed, the date must be sof filing.)  EVI: Other provisions, if any.  REOURED SIGNATURE:  Signature of a regular constitutes an affirmation in I am aware that any false inficunstitutes a third degree felicities.	nomber of an authorized representative of a member.  dof. 0203 (1) (b). Florida Statues, the execution of this document der the penalties of perjury that the facts stated herein are true.  formation submitted in a document to the Department of State only as provided for in s.817.155, F.S.)  John M. Perkins  Typed or printed name of signee  Filing Fees:  Organization and Designation of Registered Agent

Page 2 of 2

TALLAHASSEE, FLORIDA