(Red	questor's Name)	
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(Cit	y/State/Zip/Phone #)	
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(Bus	siness Entity Name)	
(Do	cument Number)	
Certified Copies	_ Certificates of Status	
Special Instructions to I	Filing Officer:	
	Office Use Only	

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COVER LETTER

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TO: Registration Section Division of Corporations

Michigan Place Holdings, LLC

SUBJECT:

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Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Jerrell M. Davis

Name of Person

Madison Properties USA, LLC

Firm/Company

2462 East Michigan Street

Address

Orlando, Florida 32806

City/State and Zip Code

jerrelldavis@aol.com

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

For further information concerning this matter, please call:

Jerrell M. Davis			9-4323	
Name	of Contact Person	at () Area Code	Daytime Telephone Number	
MAILING ADDRESS	<u>.</u>	STF	REET ADDRESS:	
Division of Corporation	S	Divi	sion of Corporations	
Registration Section		Registration Section		
P.O. Box 6327		-	on Building	
Tallahassee, FL 32314		2661 Executive Center Circle		
		Tall	ahassee, FL 32301	
Enclosed is a check for the follow	ving amount:			
\$ 125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filing Fee Certified Copy	e & □ \$160.00 Filing Fee, Certificate of Status & Certified Copy	



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FLORIDA DEPARTMENT OF STATE Division of Corporations

February 11, 2016

JERRELL M DAVIS 2462 EAST MICHIGAN STREET ORLANDO, FL 32806

SUBJECT: MICHIGAN PLACE HOLDINGS LLC Ref. Number: W16000010420

We have received your document for MICHIGAN PLACE HOLDINGS LLC and your check(s) totaling \$125.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in-the jurisdiction-under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return 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) 245-6051.

Jenna D Harris Regulatory Specialist II

Letter Number: 616A00002933

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www.sunbiz.org

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605 0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN–LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

. MICHIgan Flace Holdings, LL	an Place Holdings, I	LLC	2
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(Name of Poreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter al Liability Company," "L.L.C,	Iternate name adopted for the purpos	e of transacting business	s in Florida. The alternate nar	ne must ine	clude "I	limited
2. New York		3. 81-0917804				
	of which foreign limited liability		(FEI number, if applicable)		
4. February 1, 2016						
··· <u></u>	(Date first transacted busine (See sections 605.0904 & 605	ess in Florida, if prior to .0905, F.S. to determine	registration.) penalty liability)			
5. 2462 East Michigan S	treet					
Orlando, Florida 3280	6					
	(Street Address of	Principal Office)		_		
6. 2462 East Michigan St	reet			_₩s	16	
Orlando, Florida 3280	6				S MAR	
	(Mailing	Address)		- Hu	2	-
7. Name and street address	ss of Florida registered agent: (P	.O. Box <u>NOT</u> accepta	able)	SH SH	Ļ.	neret and
Name:	Jerrell M. Davis	<u>- • - • • • • • • • • • • • • • • • • •</u>	-	101	AH	
Office Address:	2462 East Michigan Street		_	OF STATE F. FLORIDA	9:5 5	S. Sandar
	Orlando		, Florida <u>32806</u>		0	
	(City)		(Zip code)			

Registered agent's acceptance:

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 application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

			Jun	m	hami		
			()	(Reg	stered agent's signature)		
,	The name titl	la or consolity and ad	drees of the	norcon(a) who has/have author	ity to manage is/are:	

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Ari Bernstein, Managing Member

Jerrell M. Davis, Secretary

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

Signature of an authorized person

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

AVIS Jerrell m Typed or printed name of signee

State of New York Department of State } ss:

I hereby certify, that MICHIGAN PLACE HOLDINGS LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 12/17/2015, and that the Limited Liability Company is existing so far as shown by the records of the Department.



WITNESS my hand and the official seal of the Department of State at the City of Albany, this 15th day of March two thousand and sixteen.

antiny Siardina

Executive Deputy Secretary of State

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