

MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS

FILING ENDORSEMENT

This is to Certify that the CERTIFICATE OF RESTORATION (FOREIGN)

for

BAJCO MICHIANA II, LLC

ID NUMBER: D9003P

received by facsimile transmission on October 9, 2015 is hereby endorsed.

Filed on October 12, 2015 by the Administrator.

This document is effective on the date filed, unless a subsequent effective date within 90 days after received date is stated in the document.



Sent by Facsimile Transmission

In testimony whereof, I have hereunto set my hand and affixed the Seal of the Department, in the City of Lansing, this 12th day of October, 2015.

Julia Dale

**Julia Dale, Acting Director
Corporations, Securities & Commercial Licensing Bureau**

BCS/CD-771 (04/11)

**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
BUREAU OF COMMERCIAL SERVICES**

DATE RECEIVED	(FOR BUREAU USE ONLY)
	This document is effective on the date filed, unless a subsequent effective date within 90 days after received date is stated in the document.

NAME	
ADDRESS	
CITY	STATE ZIP CODE

Document will be returned to the name and address you enter above.
If left blank, document will be mailed to the registered office.

EFFECTIVE DATE:

CERTIFICATE OF RESTORATION OF GOOD STANDING
For use by Foreign Limited Liability Companies
(Please read information and instructions on the last page)

Pursuant to the provisions of Act 23, Public Acts of 1993, the undersigned limited liability company executes the following Certificate:

1. The name of the limited liability company is:
BAJCO MICHIGANA II, LLC
2. If the name in item 1 was not available for use in Michigan, the assumed name adopted when obtaining the Certificate of Authority is:

3. The identification number assigned by the Bureau is:

D9003P
4. Complete this item only if the name used in Michigan is no longer available for use.
The name to be used by the limited liability company in all its dealings with the Bureau and in the transaction of its business in Michigan is:

5. a. The name of the resident agent is: REGISTERED AGENT SOLUTIONS, INC.
- b. The address of the registered office is:
2285 S. MICHIGAN RD., EATON RAPIDS _____, Michigan _____ 48827
(Street Address) (City) (ZIP Code)
- c. The mailing address of the registered office IF DIFFERENT THAN SB is:
P.O. BOX 266, EATON RAPIDS, _____ MICHIGAN _____ 48827
(Street Address or P.O. Box) (City) (ZIP Code)

6. The limited liability company states that the certificate is accompanied by the annual statements and applicable fees for all of the years for which statements were not filed and fees were not paid.
7. The professional limited liability company states that the certificate is accompanied by the annual reports, annual statements and applicable fees for all of the years for which annual reports and annual statements were not filed and fees were not paid and applicable penalty fees.

Signed this 14th day of SEPTEMBER 2015
By [Signature] NADEEM S. BAJWA
(Signature) (Type or Print Name and Capacity)


LIMITED LIABILITY COMPANY ANNUAL STATEMENT

2013



Due February 15, 2013

File Online at www.michigan.gov/fileonline

Identification Number D9003P	Limited Liability Company Name BAJCO MICHIANA II, LLC		
1. Resident agent name and mailing address of the registered office MADEEM S. BAJWA 5140 S. WESTNEDGE AVE PORTAGE MI 49002		If different from 1, change resident agent and mailing address of registered office in MICHIGAN.	
2. The address of the registered office 5140 S. WESTNEDGE AVE PORTAGE MI 49002		If different from 2, change address of registered office (number, street, city, state, zip) in MICHIGAN.	
3. Signature of authorized member, manager or agent. 	Title CEO	Date 09/14/15	Phone (Optional)

Filing Fee: \$25.00

Annual Statement must be received by agency on or before February 15, 2013.

Annual Statement Must Be Signed

Domestic: Signature of a manager if management is vested in managers, by at least 1 member if management remains in the members or by an authorized agent of the domestic limited liability company.

Foreign: Signature of a person with authority to do so under the laws of the foreign limited liability company's jurisdiction of organization.

Required by Section 207, Act 23, Public Acts of 1993.

File online at www.michigan.gov/fileonline

or mail your completed statement with a check or money order payable to the State of Michigan.


Return to: Corporations Division
P.O. Box 30768
Lansing MI 48909
(517) 241-6470

2014



Due February 15, 2014

File Online at www.michigan.gov/fileonline

Identification Number D9003P		Limited Liability Company Name BAJCO MICHIANA II, LLC	
1. Resident agent name and mailing address of the registered office MADEEM S. BAJWA 5140 S. WESTNEDGE AVE PORTAGE MI 49002		If different from 1, change resident agent and mailing address of registered office in MICHIGAN.	
2. The address of the registered office 5140 S. WESTNEDGE AVE PORTAGE MI 49002		If different from 2, change address of registered office (number, street, city, state, zip) in MICHIGAN.	
3. Signature of authorized member, manager or agent. 	Title CEO	Date 02/14/15	Phone (Optional)

Filing Fee: \$25.00

Annual Statement must be received by agency on or before February 15, 2014.

Annual Statement Must Be Signed

Domestic: Signature of a manager if management is vested in managers, by at least 1 member if management remains in the members or by an authorized agent of the domestic limited liability company.

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Required by Section 207, Act 23, Public Acts of 1993.

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**2015**

Due February 15, 2015

File Online at www.michigan.gov/fileonline

Identification Number D9003P		Limited Liability Company Name BAJCO MICHIANA II, LLC	
1. Resident agent name and mailing address of the registered office MADEEM S. BAJWA 5140 S. WESTNEDGE AVE PORTAGE MI 49002		If different from 1, change resident agent and mailing address of registered office in MICHIGAN. REGISTERED AGENT SOLUTIONS, INC. P.O. BOX 266 EATON RAPIDS, MI 48827	
2. The address of the registered office 5140 S. WESTNEDGE AVE PORTAGE MI 49002		If different from 2, change address of registered office (number, street, city, state, zip) in MICHIGAN. 2285 S. MICHIGAN RD. EATON RAPIDS, MI 48827	
3. Signature of authorized member, manager or agent. 	Title CEO	Date 09/14/15	Phone (Optional)

Filing Fee: \$25.00

Annual Statement must be received by agency on or before February 15, 2015.

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