



Form Revision Date 07/2016

## ANNUAL STATEMENT

*(Required by Section 207, Act 23, Public Act of 1993)*

Identification Number:	802178577
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Annual Statement Filing Year: 2020
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1. Limited Liability Company Name: DEARBORN ELITE HOSPITALITY, LLC
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2. The street address of the limited liability company's registered office and name of the resident agent at that office:		
1. Resident Agent Name:	JOEL YONO	
2. Street Address:	2600 AUBURN ROAD	
Apt/Suite/Other:	SUITE 240	
City:	AUBURN HILLS	
State:	MI	Zip Code: 48326
3. Mailing address of the registered office:		
P.O. Box or Street Address:	2600 AUBURN ROAD	
Apt/Suite/Other:	SUITE 240	
City:	AUBURN HILLS	
State:	MI	Zip Code: 48326

This annual statement must be signed by a member, manager, or an authorized agent.

Signed this 4th Day of February, 2020 by:

Signature	Title	Title if "Other" was selected
Christine Moore	Other	Paralegal

By selecting ACCEPT, I hereby acknowledge that this electronic document is being signed in accordance with the Act. I further certify that to the best of my knowledge the information provided is true, accurate, and in compliance with the Act.

Decline       Accept

**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS**

**FILING ENDORSEMENT**

***This is to Certify that the*** 2020 ANNUAL STATEMENT

***for***

DEARBORN ELITE HOSPITALITY, LLC

***ID Number:*** 802178577

***received by electronic transmission on*** February 04, 2020 ***, is hereby endorsed.***

***Filed on*** February 04, 2020 ***, by the Administrator.***

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



***In testimony whereof, I have hereunto set my hand and affixed the Seal of the Department, in the City of Lansing, this 4th day of February, 2020.***

*Linda Clegg*

***Linda Clegg, Interim Director***

***Corporations, Securities & Commercial Licensing Bureau***