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		NUAL STATEMENT	Form Revision Date 07/2016
		REIGN LIMITED LIABILITY COMP	
(Required by Section 207, Act 23, Public Act of 1993)			
Identification Number:		802513310	
Annual Statement Filing Year: 2022			
Limited Liability Company	Name:		
ANGEL HOMES MI LLC			
The street address of the limited liability company's registered office and name of the resident agent at that office:     Resident Agent Name: NCH REGISTERED AGENT			
2. Street Address: Apt/Suite/Other:	42 BROADWAY, FL. 12		
City:	NEW YORK	7in Code: 10001	
State:	MI	Zip Code: 10004	
3. Mailing address of the re P.O. Box or Street Address: Apt/Suite/Other:	egistered office:		
City: State:		Zip Code:	
This applied statement mus	t be signed by a member man	ager or an authorized agent	
Signed this 28th Day of Jur	t be signed by a member, man ne, 2022 by:	ager, or an authorized agent.	
Signature		Title	Title if "Other" was selected
Angelique Simmons		Manager	
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.  jm Decline jm Accept			

## MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS FILING ENDORSEMENT

This is to Certify that the 2022 ANNUAL STATEMENT

for

ANGEL HOMES MILLC

*ID Number:* 802513310

received by electronic transmission on June 28, 2022 , is hereby endorsed.

Filed on June 28, 2022 , 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 28th day of June, 2022.

Linda Clegg, Director

Corporations, Securities & Commercial Licensing Bureau