

07/2016

			Form Revision Date 0
		NUAL STATEMENT	
	-	DMESTIC LIMITED LIABILITY COMPANY	
	(Required by	Section 207, Act 23, Public Act of 1993)	
Identification Number:		803017225	
Annual Statement Filing Ye	ear: 2024		
1. Limited Liability Compan	y Name:		
APJOHN AG 4, LLC			
A JOHN AG 4, LLC			
	· · ·	egistered office and name of the resident	agent at that office:
 Resident Agent Name: Street Address: 	DONALD R. PARFET	-	
	350 EAST MICHIGAN AVENUE	E	
Apt/Suite/Other:	SUITE 500		
City:	KALAMAZOO		
State:	MI	Zip Code: 49007	
3. Mailing address of the r	egistered office:		
P.O. Box or Street	350 E. MICHIGAN AVENUE		
Address: Apt/Suite/Other:	SUITE 500		
City:	KALAMAZOO		
State:	MI	Zip Code: 49007	
	st be signed by a member, ma	nager, or an authorized agent.	
Signed this 7th Day of Feb	ruary, 2024 by:		
Signature		Title	Title if "Other" was selected
DONALD R PARFET		Member	
		ectronic document is being signed in acco ded is true, accurate, and in compliance w	
······································	J	m Decline in Accept	
		 -	

MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS

FILING ENDORSEMENT

This is to Certify that the 2024 ANNUAL STATEMENT

for

APJOHN AG 4, LLC

ID Number: 803017225

received by electronic transmission on February 07, 2024 , is hereby endorsed.

Filed on February 07, 2024 , 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 7th day of February, 2024.

Jinda (

Linda Clegg, Director Corporations, Securities & Commercial Licensing Bureau