

Little Traverse Bay Bands of Odawa Indians
Application to Register a Corporation

This application shall be open to inspection by the public P _____

Pursuant to the provisions of WOS 2003-07, Part One, the undersigned execute the following and will operate as a Corporation:

1. The name and principal office address of the corporations is:

Note: The name must contain the words "Limited Liability Corporation" or the abbreviation "L.L.C." or "LLP" at the end of the name.

2. A brief statement of the business of the corporation.

3. To Be Completed By Foreign Limited Liability Partnerships Only

a. Home state of partnership if located outside of Michigan: _____

b. Name of registered agent to receive service of process: _____

c. Address of the registered office in Michigan:

_____, Michigan _____

(Street Address) (City) (Zip Code)

4. Federal Employer Identification Number if available: ___ - _____

5. AUTHORIZING SIGNATURES. This application has been executed by a majority in interest of the partners or by one or more individuals authorized by a majority in interest of the partners. If there are more than two signatures, use additional pages and attach to this application.

Signature _____ Social Security Number (Optional) _____

Signature _____ _____

Date Received

FOR DEPARTMENTAL USE ONLY

This registration expires one year from "filed" date.