



BARBARA K. CEGAVSKE Secretary of State 202 North Carson Street Carson City, Nevada 89701-4201 (775) 684-5708 Website: www.nvsos.gov

050106

Articles of Organization Limited-Liability Company

(PURSUANT TO NRS CHAPTER 86)

Filed in the office of	Document Number
Barbara K. Cegarste	20160307842-33
Barbara K. Cegavske	Filing Date and Time
Secretary of State	07/11/2016 6:19 PM
State of Nevada	Entity Number
	F0307562016-8

USE BLACK INK ONLY - DO NOT HIGHLIGHT ABOVE SPACE IS FOR OFFICE USE ONLY 1. Name of Limited-Check box if a Check box if a MILAN INVESTMENT LIMITED CO. Restricted Limited-Liability Company: Series Limited-Liability Company Liability Company (must contain approved limited-liability company wording; see instructions) 2. Registered Commercial Registered Agent: LEE ACCOUNTING SERVICES, LLC Agent for Service of Process: (check Noncommercial Registered Agent Office or Position with Entity <u>OR</u> only one box) (name and address below) (name and address below) Name of Noncommercial Registered Agent OR Name of Title of Office or Other Position with Entity Nevada Street Address City Zip Code Nevada Mailing Address (if different from street address) Zip Code City 3. Dissolution Latest date upon which the company is to dissolve (if existence is not perpetual): Date: (optional) 4. Management: OR Company shall be managed by: Manager(s) Member(s) (required) 5. Name and 1) JUN XU Address of each Manager or 10785 W TWAIN AVE STE 100 LAS VEGAS NV 89135 Managing Member: Street Address State Zip Code (attach additional page if more than 3) 2) OI HUANG 10785 W TWAIN AVE STE 100 LAS VEGAS NV 89135 Street Address City Zip Code State Street Address City State Zip Code 6. Name, Address I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of and Signature of the Secretary of State. Organizer: (attach עא מעע 🗶 JUN XU additional page if more Organizer Signature Name than 1 organizer) 10785 W TWAIN AVE STE 100 LAS VEGAS NV 89135 State Zip Code 7. Certificate of I hereby accept appointment as Registered Agent for the above named Entity. Acceptance of LEE ACCOUNTING SERVICES, LLC Appointment of 7/11/2016 **Registered Agent:** Authorized Signature of Registered Agent or On Behalf of Registered Agent Entity

INITIAL/ANNUAL LIST OF MANAGERS OR MANAGING MEMBERS AND STATE BUSINESS LICENSE APPLICATION OF:

ENTITY NUMBER

E0307562016-8

MILAN INVESTMENT LIMITED CO.

NAME OF LIMITED-LIABILITY COMPANY

FOR THE FILING PERIOD OF

JUL, 2016

TO

JUL, 2017



Document Number

Filing Date and Time

20160307843-44

E0307562016-8

07/11/2016 6:19 PM

USE BLACK INK ONLY - DO NOT HIGHLIGHT

YOU MAY FILE THIS FORM ONLINE AT www.nvsliverflume.gov

Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)

IMPORTANT: Read instructions before completing and returning this form.

- 1. Print or type names and addresses, either residence or business, for all manager or managing members. A Manager, or if none, a Managing Member of the LLC must sign the form. FORM WILL BE RETURNED IF UNSIGNED.
- 2. If there are additional managers or managing members, attach a list of them to this form.
- 3. Return completed form with the fee of \$150.00. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
- Sielatawasismilkeismelkeis ABOVE SPACE IS FOR OFFICE USE ONLY

Entity Number

- 4. State business license fee is \$200.00. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline
- Make your check payable to the Secretary of State
- 6. Ordering Copies: If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must
- 7. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.
- 8. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing

ANNUAL LIST FILING FEE: \$150.00 LATE PENALTY: \$75.00 (if filing late)

BUSINESS LICENSE FEE: \$200.00 LATE PENALTY: \$100.00 (if filing late)

Filed in the office of

Barbara K. Cegavske

Secretary of State

State of Nevada

Barbara K. Cegarste

CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX E	BELOW	NRS 76.020 Exemption Codes
Pursuant to NRS Chapter 76, this entity is exempt from the business licen-	001 - Governmental Entity 005 - Motion Picture Company	
NOTE: If claiming an exemption, a notarized Declaration of Eligibility for attach the Declaration of Eligibility form will result in rejection, which could		006 - NRS 680B.020 Insurance Co.
NAME JUN XU	MANAGER OR MANA	AGING MEMBER
ADDRESS	СПҮ	STATE ZIP CODE
10785 W TWAIN AVE STE 100 , USA	LAS VEGAS	NV 89135
NAME QI HUANG	MANAGER OR MANA	AGING MEMBER
ADDRESS	CITY	STATE ZIP CODE
10785 W TWAIN AVE STE 100 , USA	LAS VEGAS	NV 89135
NAME	MANAGER OR MANA	AGING MEMBER
ADDRESS	CITY	STATE ZIP CODE
NAME	MANAGED OF MAN	A OINIO MEMBED
	MANAGER OR MANA	AGING MEMBER
ADDRESS	CITY	STATE ZIP CODE

None of the managers or managing members identified in the list of managers and managing members has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of a manager or managing member in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

37					Title	Date
X	JN XU				MANAGER	7/11/2016 6:19:42 PM
===		 	 	 		







BARBARA K. CEGAVSKE Secretary of State 202 North Carson Street Carson City, Nevada 89701-4201 (775) 684-5708 Website: www.nvsos.gov

Statement of Change of **Registered Agent** by Represented Entity

(PURSUANT TO NRS 77.340)

This form may be submitted by: the Represented Entity to appoint a new Registered Agent or amend own service of process info. For more Filed in the office of Document Number Barbara K. Cegarste

Barbara K. Cegavske Secretary of State State of Nevada

20170076576-11

Filing Date and Time

02/21/2017 6:03 AM

Entity Number

E0307562016-8

Entity File Number: E0307562016-8 This statement of change will have the following effect: (check of Appoints a new agent for service of process (complete 4a or 4b) Updates contact information of the Represented Entity action of	ng as own agent (complete only one section) Nevada	e 4c)
This statement of change will have the following effect: (check of process) Appoints a new agent for service of process (complete 4a or 4b) Updates contact information of the Represented Entity active Information in effect upon the filing of this statement: (complete of Commercial Registered Agent: KATHERINE LEI CPA PLLC Name Noncommercial Registered Agent: Name Street Address City Title of Office or Other Position within Represented Entity: Name of Title or Position	ng as own agent (complete only one section) Nevada	
Appoints a new agent for service of process (complete 4a or 4b) Updates contact information of the Represented Entity action Information in effect upon the filing of this statement: (complete of Commercial Registered Agent: KATHERINE LEI CPA PLLC Name Noncommercial Registered Agent: Name Street Address City Title of Office or Other Position within Represented Entity: Name of Title or Position	ng as own agent (complete only one section) Nevada	
Appoints a new agent for service of process (complete 4a or 4b) Updates contact information of the Represented Entity action Information in effect upon the filing of this statement: (complete of Commercial Registered Agent: KATHERINE LEI CPA PLLC Name Noncommercial Registered Agent: Name Street Address City Title of Office or Other Position within Represented Entity: Name of Title or Position	ng as own agent (complete only one section) Nevada	
Updates contact information of the Represented Entity active Information in effect upon the filing of this statement: (complete of Commercial Registered Agent: KATHERINE LEI CPA PLLC Name Noncommercial Registered Agent: Name Street Address City Mailing Address (if different from street address) City Title of Office or Other Position within Represented Entity: Name of Title or Position	ng as own agent (complete	
Information in effect upon the filing of this statement: (complete of Commercial Registered Agent: KATHERINE LEI CPA PLLC Name Noncommercial Registered Agent: Name Street Address City Malling Address (if different from street address) City Title of Office or Other Position within Represented Entity: Name of Title or Position	only one section)	
Commercial Registered Agent: KATHERINE LEI CPA PLLC Name Noncommercial Registered Agent: Name Street Address City Mailing Address (if different from street address) City Title of Office or Other Position within Represented Entity: Name of Title or Position	Nevada	Zip Code
KATHERINE LEI CPA PLLC Name Noncommercial Registered Agent: Name Street Address City Mailing Address (if different from street address) City Title of Office or Other Position within Represented Entity: Name of Title or Position		Zip Code
Name Noncommercial Registered Agent: Name Street Address City Malling Address (if different from street address) City Title of Office or Other Position within Represented Entity: Name of Title or Position		Zip Code
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Mailing Address (if different from street address) City Title of Office or Other Position within Represented Entity: Name of Title or Position		Zip Code
Mailing Address (if different from street address) City Title of Office or Other Position within Represented Entity: Name of Title or Position	Nava-J-	Zip Code
Title of Office or Other Position within Represented Entity: Name of Title or Position	Mariada	محسدة سنتحسب
Title of Office or Other Position within Represented Entity: Name of Title or Position	Nevada	Listinianianian
Name of Title or Position		Zip Code
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Street Address City	en e	
City	Nevada	Zip Code
1	Navada	-
Mailing Address (if different from street address) City	Nevada	Zip Code
And the second s		zip oodo
Signature of Represented Entity: (required)		
JUN XU	2017.	. Fob. 13
horized Signature	Date	
Registered Agent Acceptance: (required)		
ereby accept appointment as Registered Agent for the above named E	intity.	
	gehaven weet to him which in the second of the general second of t	***************************************
Horized Signature of Registered Agent or On Behalf of Registered Agent Entity	02/	14/wit

FEE: \$60.00

This form must be accompanied by appropriate fees.

Nevada Secretary of State Form RA Change by Entity Revised: 1-5-15

APN: 162-16-116-179; 162-16-116-190
162-16-116-235; 162-16-116-246
162-16-116-207; 162-16-116-218

Recording Requested By:
LAWYERS TITLE

When Recorded Return To:
AMERICAN FIRST NATIONAL BANK

MAIL TAX STATEMENTS TO:
Milan Investment Limited Co.
10785 West Twain Avenue, Suite # 100
Las Vegas, NV 89135

9999 BELLAIRE BLVD

HOUSTON, TX 77036

ATTN: NOTE DEPARTEMENT

UCC FINANCING STATEMENT_____

Inst #: 20160930-0004775

LAWYERS TITLE OF NEVADA CHA

Fees: \$90.00

Requestor:

N/G Fee: \$0.00

09/30/2016 02:13:32 PM

Recorded By: SCA Pgs: 7

CLARK COUNTY RECORDER

DEBBIE CONWAY

Receipt #: 2888955

(Title of Document)

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UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS				
A. NAME & PHONE OF CONTACT AT FILER (optional) MICHAEL B. WIXOM (702) 2	252.5002			
B. E-MAIL CONTACT AT FILER (optional)		*		
mbw@slwlaw.com				
C. SEND ACKNOWLEDGMENT TO: (Name and Address)				
American First National Bank 9999 Bellaire Blvd.				
Houston, TX 77036	į			
Attention: Note Department				
<u> </u>	THE A	BOVE SPACE IS FO	R FILING OFFICE USE (ONLY
DEBTOR'S NAME: Provide only <u>one</u> Debtor name (1a or 1b) (use exaname will not fit in line 1b, leave all of item 1 blank, check here and p		te any part of the Debto	's name); if any part of the In	dividual Debtor's
1a, ORGANIZATION'S NAME Milan Investment Limited Co.				
1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
10. MAILING ADDRESS 10785 West Twain Ave., Suite 100	Las Vegas	NV	89135	USA
2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use example will not fit in line 2b, leave all of item 2 blank, check here and p				
2a, ORGANIZATION'S NAME				
OR 2b, INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	ADDITIONAL NAME(S)/INITIAL(S)	
20, MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR	I R SECURED PARTY): Provide only <u>one</u> Secu	red Party name (3a or 3	b)	
3a. ORGANIZATION'S NAME American First National Bank				
OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	ONAL NAME(S)/INITIAL(S)	SUFFIX
3c, MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
9999 Bellaire Blvd.	Houston	TX	77036	USA
See Schedule "1" attached hereto and incorporate	ed by this reference.			
5. Check only if applicable and check only one box: Collateral is held in	a Trust (see UCC1Ad, item 17 and instruction	is) being administ	ered by a Decedent's Person	al Representative
6a. Check only if applicable and check only one box:		6b. Check only	If applicable and check <u>only</u>	
Public-Finance Transaction Manufactured-Home Transac	in the second se			nsee/Licensor
7. ALTERNATIVE DESIGNATION (If applicable): Lessee/Lessor 8. OPTIONAL FILER REFERENCE DATA:	T considirent considire		Titon	
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UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS						
9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if it because Individual Debtor name did not fit, check here	ine 1b was left bl	ank				
9a. ORGANIZATION'S NAME						
Milan Investment Limited Co.						
OR 9b. INDIVIDUAL'S SURNAME						
FIRST PERSONAL NAME						
FIRST PERSONAL NAME						
ADDITIONAL NAME(S)/INITIAL(S)	sı	JFFIX				
					s for filing office (
 DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or it do not omit, modify, or abbreviate any part of the Debtor's name) and enter the ma 	Debtor name tha alling address in	t did not fit in line ' line 10c	1b or 2b of the Fi	nancing S	tatement (Form UCC1) (use	exact, full name;
10a. ORGANIZATION'S NAME						
OR 10b. INDIVIDUAL'S SURNAME			· · · · · · · · · · · · · · · · · · ·			
INDIVIDUAL'S FIRST PERSONAL NAME			t ty taken in the beginning of a con-			
(NDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)						ISUFFIX
HARMINGUE & CIRCLIFICANCE ACINICIONITAL INTERV						
10c. MAILING ADDRESS	CITY	,		STATE	POSTAL CODE	COUNTRY
	DD OFOLIDE	D DADTVIO N	AAAM. D. 11		144	
11. ADDITIONAL SECURED PARTY'S NAME or ASSIGNO	OR SECURE	D PARTY'S N	AME: Provide o	nly <u>one</u> na	ime (11a or 11b)	
TIE, ONGARIZATION STYANIC						
OR 11b, INDIVIDUAL'S SURNAME	FIRST PERSOI	NAL NAME		ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
11c. MAILING ADDRESS	CITY			STATE	POSTAL CODE	COUNTRY
12, ADDITIONAL SPACE FOR ITEM 4 (Collateral):						
12, ADDITIONAL SPACE FOR IT LIKE 4 (Odliatoral).						
13. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the	14. This FiNAL	ICING STATEMEN	√ T:			
REAL ESTATE RECORDS (if applicable)	covers	s timber to be cut	covers as-	extracted	oollateral 🚺 is filed as a	fixture filing
15. Name and address of a RECORD OWNER of real estate described in Item 16 (If Debtor does not have a record interest):	16. Description	n of real estate:				
(iii debite) debit iii ii	See Exhi	bit "A" attac	ched hereto	and ir	corporated by this	reference
17. MISCELLANEOUS:		· · · · · · · · · · · · · · · · · · ·				
1 () 11 0 0 0 0 0 0 0 0 0						

DEBTOR'S NAME: MILAN INVESTMENT LIMITED CO.

SCHEDULE "1"

All of the property described below in, to, or under which Debtor now has or hereafter acquires any right, title or interest, whether present, future, or contingent: all equipment, inventory, accounts, accounts receivable, rights to payment, general intangibles, instruments, documents, and chattel paper, as those terms are defined in the Uniform Commercial Code, and all other personal property of any kind (including without limitation money and rights to the payment of money), whether now existing or hereafter created, that are now or at any time hereafter (i) in the possession or control of Secured Party in any capacity; (ii) erected upon, attached to, or appurtenant to, the real property described below in Exhibit "A" (the "Real Property"); (iii) located or used on the Real Property or identified for use on the Real Property (whether stored on the Real Property or elsewhere); or (iv) used in connection with, arising from, related to, or associated with the Real Property or any of the personal property described herein, the construction of any improvements on the Real Property, the ownership, development, maintenance, leasing, management, or operation of the Real Property, the use or enjoyment of the Real Property, or the operation of any business conducted on the Real Property; including without limitation all such property more particularly described as follows:

Buildings, mobile or modular homes or structures located on the Real Property, and all other structures and improvements, and building materials, fixtures and equipment to be incorporated into any buildings, structures or improvements;

Goods, materials, supplies, fixtures, equipment, washers, dryers, appliances, machinery, furniture and furnishings, including without limitation, all such items used for (i) generation, storage or transmission of air, water, heat, steam, electricity, light, fuel, refrigeration or sound; (ii) ventilation, air-conditioning, heating, refrigeration, fire prevention and protection, sanitation, drainage, cleaning, transportation, communications, maintenance or recreation; (iii) removal of dust, refuse, garbage or snow; (iv) transmission, storage, processing or retrieval of information; and (v) floor, wall, ceiling and window coverings and decorations;

Income, receipts, revenues, rents, issues and profits, including without limitation, room rents, minimum rents, additional rents, percentage rents, occupancy and user fees and charges, license fees, parking and maintenance charges and fees, tax and insurance contributions, proceeds of the sale of utilities and services, cancellation premiums, and claims for damages arising from the breach of any leases;

Water and water rights, ditches and ditch rights, reservoirs and reservoir rights, stock or interest in irrigation or ditch companies, minerals, oil and gas rights, royalties, and lease or leasehold interests;

Plans and specifications prepared for the construction of any improvements, including without limitation, all studies, estimates, data, and drawings;

Documents, instruments and agreements relating to, or in any way connected with, the operation, control or development of the Real Property, including without limitation, any

declaration of covenants, conditions and restrictions and any articles of incorporation, bylaws and other membership documents of any property owners association or similar group;

Claims and causes of action, legal and equitable, in any form whether arising in contract or in tort, and awards, payments and proceeds due or to become due, including without limitation those arising on account of any loss of, damage to, taking of, or diminution in value of, all or any part of the Real Property or any personal property described herein;

Sales agreements, escrow agreements, deposit receipts, and other documents and agreements for the sale or other disposition of all or any part of the Real Property or any of the personal property described herein, and deposits, proceeds and benefits arising from the sale or other disposition of all or any part of the Real Property or any of the personal property described herein;

Policies or certificates of insurance, contracts, agreements or rights of indemnification, guaranty or surety, and awards, loss payments, proceeds, and premium refunds that may be payable with respect to such policies, certificates, contracts, agreements or rights;

Contracts, agreements, permits, licenses, authorizations and certificates, including without limitation all architectural contracts, construction contracts, management contracts, service contracts, maintenance contracts, franchise agreements, license agreements, building permits and operating licenses;

Easements, rights-of-access, license agreements, rights-of-way, that in any way relate to or benefit the Real Property;

Trade names, trademarks, and service marks (subject to any franchise or license agreements relating thereto);

Refunds and deposits due or to become due from any utility companies or governmental agencies;

Replacements and substitutions for, modifications of, and supplements, accessions, addenda and additions to, all of the personal property described herein;

Books, records, correspondence, files and electronic media, and all information stored therein;

Any and all other rights and/or ownership interests in the said real property, pertaining or appurtenant, including, without limitation, adjacent real property acquired at a subsequent time, all development rights and mineral rights and easements and right-of-way (now owned or hereafter acquired) which are used in connection with, or related to, any portion of the said real property or as a means of ingress to or egress from said real property, and the interests of Debtor herein, it being expressly understood that the lien of this Deed of Trust will encumber all such rights and/or ownership interests at the time they become vested in Debtor.

together with all products and proceeds of all of the foregoing, in any form, including all proceeds received, due or to become due from any sale, exchange or other disposition thereof, whether such proceeds are cash or non-cash in nature, and whether represented by checks, drafts, notes or other instruments for the payment of money.

The Real Property is all that real property situate in the County of Clark, State of Nevada, and more particularly described below in Exhibit "A".

Exhibit "A"

PARCEL ONE (1):

UNITS 4610, 4622, 4710, 4722, 4810, 4822 IN THE TRUMP INTERNATIONAL HOTEL & TOWER – LAS VEGAS, AS SHOWN BY MAP THEREOF ON FILE IN BOOK 139 OF PLATS, PAGE 56, AND AS SET FORTH IN THE DECLARATION OF COVENANTS, CONDITIONS AND RESTRICTIONS AND RESERVATION OF EASEMENTS (THE "DECLARATION") FOR THE TRUMP INTERNATIONAL HOTEL & TOWER – LAS VEGAS, RECORDED FEBRUARY 22, 2008 IN BOOK 20080222 AS DOCUMENT NO. 0004835 AND RE-RECORDED MARCH 5, 2008 IN BOOK 20080305 AS DOCUMENT NO. 0002022 BOTH IN THE OFFICE OF THE COUNTY RECORDER OF CLARK COUNTY, NEVADA.

PARCEL TWO (2):

AN ALLOCATED INTEREST AS A TENANT-IN-COMMON IN THE COMMON ELEMENTS OF THE TRUMP INTERNATIONAL HOTEL & TOWER – LAS VEGAS (INCLUDING ANY ANNEXATIONS THERETO), AS SHOWN BY MAP THEREOF ON FILE IN BOOK 139 OF PLATS, PAGE 56, IN THE OFFICE OF THE COUNTY RECORDER OF CLARK COUNTY, NEVADA, AND AS SET FOR IN THE DECLARATION.

PARCEL THREE (3):

A NON-EXCLUSIVE EASEMENT FOR ACCESS, INGRESS, EGRESS, USE, ENJOYMENT AND OTHER PURPOSES ALL AS DESCRIBED IN THE DECLARATION.

Assessor's Parcel Number: 162-16-116-179; 162-16-116-190, 162-16-116-235; 162-16-116-246, 162-16-116-207; 162-16-116-218