CITY OF NOVI CITY COUNCIL SEPTEMBER 13, 2021



SUBJECT:

Consideration of approval of resolution recognizing Living and Learning Enrichment Center as a nonprofit organization operating in the City of Novi for the purpose of obtaining a charitable gaming license from the State of Michigan.

SUBMITTING DEPARTMENT: City Clerk

BACKGROUND INFORMATION: The Living and Learning Enrichment Center is a nonprofit organization based in Novi which supports teens and adults with autism or other related challenges. They are applying for a Charitable Gaming License from the State of Michigan and are required by the State Act 382 of 1972 to request a resolution recognizing them as a non-profit organization from the jurisdiction where they are based. Such a resolution carries no obligation from or endorsement by the City of Novi.

The Police Department has reviewed their submission and finds no reason to deny the request.

RECOMMENDED ACTION: Approval of resolution recognizing Living and Learning Enrichment Center as a nonprofit organization operating in the City of Novi for the purpose of obtaining a charitable gaming license from the State of Michigan.



RAFFLE LICENSE APPLICATION

For Bure	au Use	Only

	1. Organization Name			PLEASE PRIN	T OR TYPE IN BLUE OR BLACK INK.				
QU	Living and Learning Enrichment Center	Organization ID Number or Last License Number Issued							
A L	Organization Street Address	City	State	Zip Code					
I F	801 Griswold St.	Northville	MI	48167					
C	Organization Mailing Address	City	State	Zip Code	County				
A T	Same				63 Oakland ▼				
O N	Has your organization ever received a license such as bi								
	Yes - Complete application and submit with the app	propriate fee.							
N F O	and the obtained and the obtained and the obtained obtained obtained the obtained	No - You must submit the documentation requested on the Qualification Requirements sheet and become qualified before any licenses can be issued. The Qualification Requirements sheet can be obtained from our website at www.michigan.gov/cg or by calling our office at (517) 335-5780.							
R M	5. Is your organization a candidate committee, political com	mittee political party committee			d contributions or made expenditures				
Α	ballot question committee, independent committee or any by, and organized pursuant to, the Michigan Campaign F	inance Act 388 of the	of \$500	or more in the last cale	endar year for the purpose of influencing				
T	Public Acts of 1976, as amended, being sections 169.20	1 to 169.282 of the Michigan	nominat	or attempting to influence the action of voters for or agains nomination or election of a candidate, or the qualification,					
O N	Compiled Laws?		or defea	at of a ballot question?	, passage,				
	L Yes ✓ No				Yes No				
	7. Provide name, title, home address, and telephone numb	ers for the PRINCIPAL OFFICER	o.g. propido	nt					
	 Provide name, title, home address, and telephone numbers for the PRINCIPAL OFFICER, e.g., president, grand knight, worthy matron, etc., and the vice president or equivalent and one other officer of the organization. SIGNATURE OF PRINCIPAL OFFICER REQUIRED - OR - signatures of the vice president or equivalent and one other officer. NOTE: Executive director signature not acceptable. 								
	Name and Title	Street, City, S	Telephone Numbers						
	Principal Officer D. Smlth	9							
	Title								
	Cossident								
1	Signature of Principal Officer				Date 8/17/2/				
s	Name and Title	Street, City, S	Telephone Numbers						
G	Vice President or Equivalent	4	Day						
ATU	Title Organ Propriedant	-	Froning						
R E	Signature of Vice President.or Equivalent	/ _ · · · / · · · /			Data				
(S)	faren / Ot	Date 8/18/2/							
	Name and Title	Street, City, S	tate, ZIP Cod	de	Telephone Numbers				
	Other Officer Rowald E. Hoder				Day				
	Title Secretary				Evenina				
	Signature of Other Officer	Date							
	By signing above, I CERTIFY that I am at least 18 years of a misrepresentation or falsification in the information stated or chairpersons associated with this raffle will read and unders before performing any duties as a chairperson. I FURTHER revocation of the right to obtain any future licenses and I AM and directives of the Michigan Bureau of State Lottery.	tand the duties and responsibilitie CERTIFY that I am aware that fa	g our origina s of a Raffle	Il qualification status re Chairperson as describ	main unchanged. I CERTIFY that ALL ped in the Raffle Guide and Raffle Rules				

COMPLETE THE ENTIRE APPLICATION AND MAKE A COPY FOR YOUR RECORDS



	8. (Contact Person			9 Raffle Location (b)	ilding name if any			
		LuAnn Warren			Raffle Location (building name, if any) LLEC Main Campus				
	1	Mailing Address Where License Should Be Sent			Street Address				
		801 Griswold St.			801 Griswold St.				
	7	City	State	ZIP Code	City				
		Northville	MI	48167	Northville				
		Telephone Number (Dav) Err	iail Address		ZIP Code	County			
		lwarren@fivingandlearn		ngandlearning		1 '	63 Oakland ▼		
	10.	List name, home address, and telephone	numbers of the ra	ffle chairnerson(s) B	Must be a problem of a County of				
			ard member for	6 months. Playing of	ard progressive raffles	equire at least 2 ch	organization does not have general		
	<u> </u>	Attach additional list if necessary.							
R		Raffle Chairperson		Street, C	ity, State, ZIP Code		Telephone Numbers		
Α	Name 801 Griswold St.				Day				
F	ь,	achelle Vartanian	801 Gr	iswoid St.			(248) 308-3592 Evening		
L	17.6	achelle varianian	Monthsui	S N 40407					
,			NOTETIVI	ille, MI 48167					
N	ivai	lame					Day		
F O							()		
R M							Evening		
Α	11.	Dates when total value of all prizes awards	ed in one day is \$	500 or 1 ESS	T		()		
Ţ		Drawing Date(s) and Time(s) (Must be be			12. License Fee				
O N	s	Date Time a.m.		•	All drawing dates inlouded on this application must be at the same location Small Raffle Drawings - \$15 for 1, 2, or 3 dates plus \$5 for each additional drawing date.				
	M	I .							
	A L	Date Time a.m							
	L	Date Time a.m.	to	a.m.					
		Check here if there are additional draw	ing dotae and att		Large Raffle Draw	ings - \$50 for each	drawing date		
	Dates when total value of all prizes awarded in one day is MORE than \$500.								
	Dat				a. 1, 2, or 3 smali		\$15 =		
	L	Drawing Date(s) and Time(s) (Must be be			b. Additional sma	ll drawing dates	x \$5 =		
	A R G E	Date 02/22/22 _{Time} p.n ▼ 0		ρ.n <u> </u>	c. Large drawing	_{dates} 1	x \$50 = 50		
		Date Time a.m	to	a.m.					
		Check here if there are additional draw	ing datas and all	anda Kad	FEE (total lines a,	b and c)	\$ 50		
Check here if there are additional drawing dates and attach li									
	13.	If you are conducting an in-house raffle On	ILY where there is	s no presale of the ra	ffle tickets before the ev	ent, there is no пее	d to complete the raffle ticket		
	14.	below. 14. • If you are preselling tickets before the event, complete the boxes below in ink; ensure the ticket is printed with all of the required items according to Raffle							
		Rule 506.							
		 Indicate any additional information that v 							
			ı	RAFFLE		001	_001_		
т						Ticket #	Ticket #		
C		Living & Learning	∩g Enrichme	nt Center					
к			Name o	of Licensee					
E									
1		February 22, 2022			8:00	p.n▼	Purchaser's Name		
N F		Drawing Date(s)			Drawing Time(s)	P1			
O R									
М		2021 Chevrol	et Corvette				Purchaser's Address		
A		First Prize *							
0						····	Purchaser's Phone #		
N					\$300				
				_	Ticket Price				
		801 Griswold St. Nort	hville, MI				Printer		
		Raffle Location			(to be added when issued) License Number				
		1014							
		* For large prizes, you may water drawing will revert to a 50/50	ant to include a	disclaimer that sta	tes "If xxx (indicate n	umber) tickets a	re not sold, the		
		Grawing will reveil to a 30/50	raine With the	manufum prize of S	exxx undicate dollar a	mount) awarded	ı <i>"</i>		

Make checks payable to: STATE OF MICHIGAN

Submit completed application, supporting documents, and license fee to:
Charitable Gaming Division, Box 30023, Lansing, MI 48909
OVERNIGHT DELIVERY: 101 E. Hillsdale, Lansing, MI 48933

	15. If you will be using ar	n Electronic Ma	nagement Sy	stem, provide the	following information:				
							RAF	FLE	
	Supplier Name						*Name of	Licensee	
A	Supplier License Number					Ticket Nu	ımber(s)		
L T E							Drawing Date	Drawing Time	
R	 Submit a sample information shown 	of the raffle tick on the right.	et that will be	used. Raffle tick	cets must contain all		Raffle Lo	ocation	
A T							Top Prize to	be Awarded	
E E	* NOTE: The liceп business or grou	isee must appe ip name may a	ear as the so ppear on the	le sponsor of the raffle ticket as	e raffle. No other a sponsor.		Where Winning be Publich	Numbers will	
R A	100-X-						Ticket		
F F L									
E							License I (to be added v		
	16 4							***]
		randore rame di	I CONTACT OF MA	ww.micnigan.gov/	cg.)	ough a bureau directive, yo			
						through a bureau directive, g the random selection me		etailed description	of the
	handled (if applicable), and your reco	ord keeping p	rocedures. (NOT	E: THE BUREAU DOES	NOT APPROVE GAMES	of SKILL.)	f, how a tie will be	
	ADDITIONAL DRA	AWING DA	TES WHI	EN PRIZES	AWARDED ARE	\$500 OR LESS			
	Date	Time	a.m.	to	a.m.				
	Date	Time	a.m	to	a.m.				
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	ADDITIONAL DRA		O 100			MORE THAN \$500)		
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Date _____

Date _____

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Time

a.m. _____to _____a.m.

a.m. _____to _____a.m.

a.m. _____to _____a.m.

	Charitable Gaming Division 101 E. Hillsdale, Box 3002 Lansing, Michigan 48909 (517) 335-5780
LOTTERY	www.mlchigan.gov/cg

QUALIFICATION INFORMATION

For Internal Use Only

Complete this form and submit with the required qualification documents listed on the attached Qualification Requirements sheet. A Bingo, Raffle, or Charity Game Ticket license application and fee may also be submitted with this information. See box #5 below for mailing instructions.

1. ORGANIZATION INFORMA	ATION					
Organization Name						
Living and Learning Enrichment Center						
Organization Physical Street Addr	ess					
801 Griswold	Street					
City	State	Zip Code	I Court			
Morthyille Organization Mailing Address	MI	48167	County			
Organization Maining Address			나Same as Physical Address			
City						
	State	Zip Code	County			
Organization Telephone Number						
(248) 308-359	72					
2. ORGANIZATION PURPOS			1			
Briefly describe the purpose of yo	ur organization.					
To support teer	no and cidults w	ith autism or v	clated chellenges			
reach their ful	1 proteintial in con	introductionshi	ne and in the			
reach their full potential in work, relationships, and in the community,						
3. LICENSE APPLICATION						
Enclosed is a completed englishing and						
Make checks payable to STATE OF MICHIGAN. Bingo Raffle Charity Game Ticket license						
	4. AUTHORIZED CONTACT PERSON					
First Name	Last Name					
Rachelle	Vartari	'a n	Position/Role with Organization			
Mailing Address		- Cr +	Preaident			
	801 Griswold Street Morthuille					
State	Zip Code	Telephone Number (Day)	Telephone Number (Evening)			
MI	48167	Q48 30A-3692				
By signing below, I hereby certify to my knowledge. I understand that:	hat the representations, information		e, accurate, and complete to the best of			
By signing below, I hereby certify that the representations, information, and data presented are true, accurate, and complete to the best of approval to obtain a gaming license.						
Authorized Contact Person Signati	ure	- MEN 1814 - NEWS,	Date			
* acin	Print Authorized Contact Name and Title					
rint Authorized Contact Name and	d Title	· · · · · · · · · · · · · · · · · · ·	120/21			
Rachelle Vartarion, President						
5. MAILING INSTRUCTIONS						

5. MAILING INSTRUCTIONS

Mail this completed Qualification Information form, the required qualification documentation listed on the Qualification Requirements sheet, and the completed license application and fee (if also applying for a gaming license) to Charitable Gaming Division, PO Box 30023, Lansing, MI 48909. If submitting by overnight carrier (FedEx, UPS, etc.), send to Charitable Gaming Division, 101 East Hillsdale, Lansing, MI 48933.



Attachment 1 Articles of Incorporation

W

I with the on a nonstock have in-	
None None	e description and value of its real property assets are (if none insert 'none')
	(introde insert 'none')
b The description and value of its or	ersonal property assets are (if none, insert none)
None	froperty assets are (if none, insert none)
Contributions assets to be financed to	inder the felic
Contributions grapts find	and the following general plan
Contributions, grants, fund raiser	s and corporate sponsorships
d The corporation is formed on a	Directorship
	{Mambarship or Directorship} basis
ARTICLE IV	
1 The name of the resident	
1 The name of the resident agent at the Rachelle Varianian	registered office is
Total Astralian	
2 The address of its registered office in	
or to registered diffice in	Michigan is
(Street Address)	
	(City) , Michigan 48167
3 The mailing address of the registered	(ZIP Code)
3 The mailing address of the registered	onice in Michigan if different than above
(Street Address or PO Box)	
	(City) , Michigan (ZIP Code)
RTICLE V	
ne name(s) and address(es) of the incorp	
Name	oracor(s) is (are) as follows
	Decorded in
_	1769109006 Of Business Auto-
Pachelle Varlanian	Residence or Business Address
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Use space below for additional Articles or for continuation of previous Articles Please identify any Article being continued or added. Attach additional pages if needed.

Article VI is being added

Upon dissolution of the Corporation assets shall be distributed for one or more exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code, or shall be distributed to the federal government or to a state or local government for a public purpose. Any such assets not disposed of shall be disposed of by a Court of Competent Jurisdiction of the County in which the principal office of the Corporation is then located exclusively for such purposes or to such organizations, as said Court shall determine, which are organized and operated exclusively for such purposes

Article VII is being added

No part of the net earnings of the corporation shall inure to the benefit of, or be distributable to its members, trustees, officers or other private persons, except that the corporation shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distributions in furtherance of section 501(c)(3) purposes. No substantial part of the activities of the corporation shall be carrying on of propaganda, and the corporation shall not participate in, or intervene in (including the publishing or distribution of statements) any political campaign on behalf of or in opposition to any candidate for public office.

Notwithstanding any other provision of these articles, the corporation shall not carry on any other activities not permitted to be carried on (a) by a corporation exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code or (b) by a corporation, contributions to which are deductible under section 170 (c)(2) of the Internal Revenue Code or the corresponding section of any future federal tax code

(We) The incorporator(s) sign my (our) name(s) this 13	ithday of	July	2017
faculty at anca			
	-		

Attachment 2 BYLAWS

Living and Learning Enrichment Center

Attachment 2, Bylaws

ARTICLE I - NAME, PURPOSE

Section 1: The name of the organization shall be Living and Learning Enrichment Center.

Section 2: The Organization is organized exclusively for religious, charitable, scientific and educational purposes.

ARTICLE II - MEMBERS

Membership shall only consist of the board of directors.

ARTICLE III - ANNUAL MEETING

Section 1: Annual Meeting. The date of the regular annual meeting shall be set by the Board of Directors who shall also set the time and place.

Section 2: Special Meetings. Special meetings may be called by the President.

Section 3: Notice. Notice of each meeting shall be given to each board member, by mail or email, not less than ten days before the meeting.

ARTICLE IV - BOARD OF DIRECTORS

Section 1: Board Role, Size, Compensation. The Board is responsible for overall policy and direction of the Organization, and delegates' responsibility for day-to-day operations to the Officers. The Board shall have up to 9 and not fewer than 3 members. The board may receive a reasonable compensation.

Section 2: Meetings. The Board shall meet at least quarterly, at an agreed upon time and place.

Section 3: Board Elections. Election of new directors or election of current directors to a second term will occur as the first item of business at the annual meeting of the corporation. Directors will be elected by a majority vote of the current directors.

Section 4: Terms. All Board members shall serve 3 year terms, but are eligible for re-election.

Section 5: Quorum. A quorum must be attended by at least 51% percent of the Board members before business can be transacted or motions made or passed.

Section 6: Notice. An official Board meeting requires that each Board member have written notice ten days in advance.

EIN: 82-2324359

Living and Learning Enrichment Center

Section 7. Officers and Duties. There shall be three officers of the Board consisting of a President, Treasurer, and Secretary. Their duties are as follows:

The President shall convene regularly scheduled Board meetings, shall preside or arrange for other members to preside at each meeting.

The Secretary shall be responsible for keeping records of Board actions, including overseeing the taking of minutes at all board meetings, sending out meeting announcements, distributing copies of minutes and the agenda to each Board members, and assuring that corporate records are maintained.

The Treasurer shall make a report at each Board meeting. Treasurer shall chair the finance committee, assist in the preparation of the budget, help develop fundraising plans, and make financial information available to Board members and the public.

Section 8: Vacancies. When a vacancy on the Board exists, nominations for new members may be received from present Board members by the Secretary two weeks in advance of a Board meeting. These nominations shall be sent out to Board members with the regular Board meeting announcement, to be voted upon at the next Board meeting. These vacancies will be filled only to the end of the particular Board member's term.

Section 9: Resignation, Termination and Absences. Resignation from the Board must be in writing and received by the Secretary. A Board member shall be dropped for excess absences from the Board if s/he has three unexcused absences from Board meetings in a year. A Board member may be removed for other reasons by a three-fourths vote of the remaining directors.

Section 10: Special Meetings. Special meetings of the Board shall be called upon the request of the President or one-third of the Board. Notices of special meetings shall be sent out by the Secretary to each Board member postmarked two weeks in advance.

ARTICLE V - COMMITTEES

Section 1: The Board may create committees as needed.

Section 2: The three officers serve as the members of the Executive Committee. Except for the power to amend the Articles of Incorporation and Bylaws, the Executive Committee shall have all of the powers and authority of the Board of Directors in the intervals between meetings of the Board of Directors, subject to the direction and control of the Board of Directors.

ARTICLE VI - AMENDMENTS

These Bylaws may be amended when necessary by a two-thirds majority of the Board of Directors. Proposed amendments must be submitted to the Secretary to be sent out with regular Board announcements.

EIN: 82-2324359

Living and Learning Enrichment Center

EIN: 82-2324359

ARTICLE VII - ADOPTION

These bylaws were approved and adopted at a meeting of the Board of Directors on August 1,2017.

INTERNAL REVENUE SERVICE P. O. BOX 2508 CINCINNATI, OH 45201

Date: 0CT 2 6 2017

LIVING AND LEARNING ENRICHMENT CENTER C/O FLOYD GREEN JR 3114 MERCER UNIVERSITY DR STE 200 ATLANTA, GA 30341 Employer Identification Number: 82-2324359 DLN: 17053219321007 Contact Person: RENEE RAILEY NORTON ID# 31172 Contact Telephone Number: (877) 829-5500 Accounting Period Ending: December 31 Public Charity Status: 170(b)(1)(A)(vi) Form 990/990-EZ/990-N Required: Yes Effective Date of Exemption: July 27, 2017 Contribution Deductibility: Yes Addendum Applies: No

Dear Applicant:

We're pleased to tell you we determined you're exempt from federal income tax under Internal Revenue Code (IRC) Section 501(c)(3). Donors can deduct contributions they make to you under IRC Section 170. You're also qualified to receive tax deductible bequests, devises, transfers or gifts under Section 2055, 2106, or 2522. This letter could help resolve questions on your exempt status. Please keep it for your records.

Organizations exempt under IRC Section 501(c)(3) are further classified as either public charities or private foundations. We determined you're a public charity under the IRC Section listed at the top of this letter.

If we indicated at the top of this letter that you're required to file Form 990/990-EZ/990-N, our records show you're required to file an annual information return (Form 990 or Form 990-EZ) or electronic notice (Form 990-N, the e-Postcard). If you don't file a required return or notice for three consecutive years, your exempt status will be automatically revoked.

If we indicated at the top of this letter that an addendum applies, the enclosed addendum is an integral part of this letter.

For important information about your responsibilities as a tax-exempt organization, go to www.irs.gov/charities. Enter "4221-PC" in the search bar to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

Letter 947

LIVING AND LEARNING ENRICHMENT

We sent a copy of this letter to your representative as indicated in your power of attorney.

Sincerely,

In their a nexten

Director, Exempt Organizations Rulings and Agreements

MEMORANDUM



TO: CORTNEY HANSON / CITY CLERK

FROM DAVID E. MOLLOY / CHIEF OF POLICE

SUBJECT: CHARITABLE GAMING LICENSE / LIVINGLEARNING ENRICHMENT

DATE: SEPTEMBER 7, 2021

An application for a charitable gaming permit for Luann Warren on behalf of Living and Learning Enrichment, requesting raffle sales at an event, located at 801 Griswold St, in the City of Novi. This event takes place on February 22, 2022 from 1:00pm to 10:00pm. Contact information for Luann: 248-408-6552

This application has been reviewed and with this we find no reason to deny this request.



State of Michigan
Michigan Gaming Control Board
Office of the Executive Director
P.O. Box 30786
Lansing, MI 48909
Phone: (313) 456-4940
Fax: (313) 456-3405
Email: Millionaireparty@michigan.gov
www.michigan.gov/mgcb

LOCAL GOVERNING BODY RESOLUTION FOR CHARITABLE GAMING LICENSES

(Required by MCL.432.103(k)(ii))

At aREGUL	AR OR SPECIAL meeting of the TOWNSHIP, CITY, OR VILLAGE COUNCIL/BOARD
called to order by _	on
	a.m./p.m. the following resolution was offered:
Moved by	and supported by
that the request from	of , NAME OF ORGANIZATION CITY
county of	, asking that they be recognized as a nonprofit
organization operating	g in the community, for the purpose of obtaining charitable gaming licenses, be
considered for APPR	OVAL/DISAPPROVAL.
APPROVAL: Yea	s: <u>DISAPPROVAL</u> : Yeas:
Nay	vs: Nays:
Abs	ent: Absent:
by the	ne foregoing is a true and complete copy of a resolution offered and adopted at a REGULAR OR SPECIAL
meeting held on	DATE
SIGNED:	TOWNSHIP, CITY, OR VILLAGE CLERK
	PRINTED NAME AND TITLE
	ADDRESS
Organization Informa	tion: ORGANIZATION'S MAILING ADDRESS, STREET, CITY, ZIP ()
	ORGANIZATION'S PRINCIPAL OFFICER NAME AND TITLE PHONE NUMBER