



**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** GREENPATH, INC.  
Name of Corporation

**DOCUMENT NUMBER:** F00000005106

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

**Paula Baker**

Name of Contact Person

**Registered Agent Solutions, Inc.**

Firm/Company

**1701 Directors Blvd.. Suite 300**

Address

**Austin, TX 78744**

City/State and Zip Code

**clientservices@rasi.com**

E-mail address: (to be used for future annual report notification)

FILED  
15 JUN 22 PM 3:09  
SECRETARY OF STATE  
TALLAHASSEE, FL 32301

For further information concerning this matter, please call:

**Paula Baker**

Name of Contact Person

at ( **888** ) **705-7274**

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Michigan in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: GREENPATH, INC.
2. The principal office address: 36500 CORPORATE DRIVE  
FARMINGTON HILLS, MI 48331
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 09/11/2000 Document number: F00000005106
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

NRAI SERVICES, INC  
1200 South Pine Island Road  
Plantation, FL 33324


6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Registered Agent Solutions, Inc.  
155 Office Plaza Dr., Suite A  
P.O. Box NOT acceptable  
Tallahassee, FL 32301

SECRET  
TALLAHASSEE, FLORIDA  
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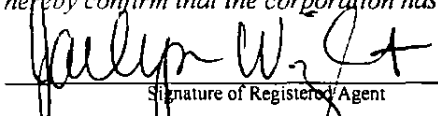
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
Signature of an officer or director

Jane E. McNamara, President  
Printed or typed name and title

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

  
Signature of Registered Agent

06/17/2015  
Date

If signing on behalf of an entity:  
Jaclyn Wright, Asst. Secretary  
Typed or Printed Name

\*\*\* FILING FEE: \$35.00 \*\*\*