

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M10000003258

Entity Name: TALASCEND, LLC

FILED
Apr 27, 2012
Secretary of State

Current Principal Place of Business:

5700 CROOKS ROAD
NORTHFIELD PLAZA II, SUITE 450
TROY, MI 48098

New Principal Place of Business:

5700 CROOKS ROAD
SUITE 450
TROY, MI 48098 US

Current Mailing Address:

5700 CROOKS ROAD
NORTHFIELD PLAZA II, SUITE 450
TROY, MI 48098

New Mailing Address:

5700 CROOKS ROAD
SUITE 450
TROY, MI 48098 US

FEI Number: 74-3034970

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: WOOD, RON
Address: 5700 CROOKS ROAD, SUITE 450
City-St-Zip: TROY, MI 48098 US

Title: MGR
Name: SHOLK, BRUCE
Address: 5700 CROOKS ROAD, SUITE 450
City-St-Zip: TROY, MI 48098 US

Title: MGR
Name: WOOD, MAUREEN
Address: 5700 CROOKS ROAD, SUITE 450
City-St-Zip: TROY, MI 48098 US

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: CRYSTAL MCKENZIE

POA

04/27/2012

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date