Current Ma	iling Address:			
848 BRICKI MIAMI, FL	ELL KEY DRIVE, APT.1201 33131			
FEI Numbe	er: 61-1742245		Certificate of Status Desired: No	
Name and	Address of Current Registered Agent:			
	CPA			
11120 N KENE STE 200	DALL DR			
PUENTE, JIM 11120 N KENE STE 200 MIAMI, FL 33 The above name	DALL DR	y its registered office or regis	stered agent, or both, in the State of Flo	rida.
11120 N KENE STE 200 MIAMI, FL 33 The above name	DALL DR 176 US	y its registered office or regis	stered agent, or both, in the State of Flo	rida. 03/25/201
11120 N KENE STE 200 MIAMI, FL 33 The above name	DALL DR 176 US ed entity submits this statement for the purpose of changing	ŋ its registered office or regis	stered agent, or both, in the State of Flo	
11120 N KENE STE 200 MIAMI, FL 33 The above name SIGNATUR	DALL DR 176 US ed entity submits this statement for the purpose of changing E: JIM PUENTE, CPA	g its registered office or regis	stered agent, or both, in the State of Flo	03/25/201
11120 N KENE STE 200 MIAMI, FL 33 The above name SIGNATUR Authorized	DALL DR 176 US ed entity submits this statement for the purpose of changing E: JIM PUENTE, CPA Electronic Signature of Registered Agent	g its registered office or regis	stered agent, or both, in the State of Flo	03/25/201
11120 N KENE STE 200 MIAMI, FL 33 The above name SIGNATUR Authorized Title	DALL DR 176 US ed entity submits this statement for the purpose of changing E: JIM PUENTE, CPA Electronic Signature of Registered Agent I Person(s) Detail :			03/25/201
11120 N KENE STE 200 MIAMI, FL 33 The above name SIGNATUR	DALL DR 176 US ed entity submits this statement for the purpose of changing E: JIM PUENTE, CPA Electronic Signature of Registered Agent I Person(s) Detail : MGR	Title	MGR	03/25/201 Date

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

MGR

SIGNATURE: SEBASTIANO CARBONE

Electronic Signature of Signing Authorized Person(s) Detail

03/25/2016

Date

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000118342

Entity Name: MICHIGAN REH III, LLC

Current Principal Place of Business:

848 BRICKELL KEY DRIVE, APT. 1201