458145

(Re	questor's Name)	
(Ad	dress)	•
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
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SECRETARY OF STATE DIVISION OF CORPORATION

RARDCH8
(10 4.30.15



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Lindsey Lockard 1

lindsey.lockard@cscglobal.com

Date: April 21, 2015

Order#: 589495/007

Re: LONGMAN ENTERPRISES, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

Please take the following action:

XX File in your office on a routine basis.

XX____ Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Lindsey Lockard

c/o Corporation Service Company
2711 Centerville Road, Suite 400

Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

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

statement of ch	ange is submitted for a corpord	2, 617.0302, 607.1308, or 617.1308, Florida Statutes, t ution organized under the laws of the State of FL e or registered agent, or both, in the State of Florida.	nis 	-
	the corporation: LONGMAN E			
	l office address:			
	boro Blvd, Suite 400, DEERFII	ELD BEACH FL 33441		
3. The mailing	address (if different): 24800 D	enso Drive, Suite 255, Southfield, MI 48034		
4. Date of incor	poration/qualification: 09/27/1	974 Document number: 458145		
5. The name an		egistered agent and registered office on file with the		
	CT CORPORATION SYSTEM		22	VIO.
	1200 S. PINE ISLAND ROAL)	115 APR 23	SECRE!
	PLANTATION	FL 33324	23	OF ARY
6. The name and (if changed):	•	stered agent (if changed) and /or registered office	PH 2: 44	ARY OF STAIL OF CORPORATIONS
	1201 Hays Street			
P.O. Box NOT acceptable				
	Tallahassee	FL 32301		
The street addr as changed will	ess of its registered office and l be identical.	the street address of the business office of its registered	ed age	nt,
Such change w authorized by the	as authorized by resolution du he board, or the corporation ha	ly adopted by its board of directors or by an officer so as been notified in writing of the change.	ı	
		Dona Priebe, Vice President		
I further agree performance of agent. Or, if th hereby confirm	to comply with the provisions fmy duties, and I am familiar v iis document is being filed mer	Printed or typed name and title I agent and agree to act in this capacity. of all statutes relative to the proper and complete with and accept the obligation of my position as regist ely to reflect a change in the registered office address notified in writing of this change.	ered ;, I	-
By:	in all menses	04/20/2015		
- Vig	gnature of Registered Agent	Date		•
If signing on be	ehalf of an entity:			
Sylvia Queppe	t, Asst. Vice President			
Ţ	yped or Printed Name	<u> </u>		

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