## LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED May 13, 2002 8:00 am Secretary of State

05-13-2002 90032 040 \*\*\*\*50.00

DOCUMENT # L01000021964

1. Entity Name

420 N. MAIN ST., LLC

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			www.combane				-				
2. Principal Pl	ace of Business	3. Mailing Address		Sand Carl San Area	:						
One 1	Towne Square	One Towne S	Square		·						
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE						
	<del># 1913</del>	Suite# 1913									
City & State		City & State			4. FEI Number Applied For						
	field, Michigan	Southfield, Mi			30-001738		Not Applicable				
Zip <b>4807</b> 6	Country U.S.A.	Zip 48076	Country U.S.A	<b>.</b> _	5. Certificate of Status Desired		5.00 Additional see Required				
in the state of the	The Late of the La	Similar March Comment	Carlo Carlo	··	7. Name and Address of Currer	it Registered A	gent				
			N	ame	CT Corporation System						
3356	DO NOT V	VRITE		treet Address	(P.O. Box Number is Not Acceptable)						
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I. The above	named entity submits this statemen	t for the purpose of changing i	its registered o	ffice or regist	ered agent, or both, in the State of F	lorida.	•				
						. •					
SIGNATURE _	NA Signature, typed or printed name of registered ag	ent and title if applicable.			-	DATE	<del></del>				
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) <u>.</u>		IBERS/MANAGERS	100								
ITLE	MGR		TITLE								
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ITY-ST-ZIP	One Towne Square, Suite# 1	913	CITY-ST-	2000 ALK ARREST							
ITLE .	Southfield, MI 48076		STITLE SA								
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1. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: Scott J. Seligman, President of Seligman FLP, Inc.

4/26/02

248-862-8000