

**LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jan 21, 2003 8:00 am
Secretary of State

01-21-2003 90323 009 ****50.00

DOCUMENT # L02000007722

1. Entity Name

YELLOW BLUFF GROUP LLC



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

45000 River Ridge Drive

3. Mailing Address

45000 River Ridge Drive

Suite, Apt. #, etc.

Suite 200

Suite, Apt. #, etc.

Suite 200

City & State

Clinton Township, MI

City & State

Clinton Township

4. FEI Number

43-1955085

Applied For

Not Applicable

Zip

48038

Country

U.S.A.

Zip

MI

Country

48038

5. Certificate of Status Desired ☐

**\$5.00 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

20012743

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name **CT Corporation System**

Street Address (P.O. Box Number is Not Acceptable)

1200 South Pine Island Road

City **Plantation**

FL

Zip Code
33324

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

DATE

FEE IS \$50.00

Make Check Payable to Florida Department of State

DUE BY MAY 1

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
Manager - Stephen M. Legget 45000 River Ridge Drive, Suite 200 Clinton Township, MI 48038			
Member - Douglas B. Grosse 45000 River Ridge Drive, Suite 200 Clinton Township, MI 48038			
Manager - John T. Robson 45000 River Ridge Drive, Suite 200 Clinton Township, MI 48038			
Member - Carlo J. Catenacci 45000 River Ridge Drive, Suite 200 Clinton Township, MI 48038			
Manager - Michael J. Catenacci 45000 River Ridge Drive, Suite 200 Clinton Township, MI 48038			
Member - Joseph E. Catenacci 45000 River Ridge Drive, Suite 200 Clinton Township, MI 48038			

**DO NOT WRITE
IN THIS SPACE**

11. 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

1/13/03

Date

586-416-4500

Daytime Phone #

CR2E083B (12/02)

YELLOW BLUFF GROUP LLC

43-1955085

TITLE

NAME

ADDRESS

CITY-ST-ZIP

Member

RAYMOND A. PACE

45000 RiverRidge Drive, Suite 200
Clinton Township, MI 48038

TITLE

NAME

ADDRESS

CITY-ST-ZIP

Member

ANTHONY V. WILLIAMS

45000 River Ridge Drive, Suite 200
Clinton Township, MI 48038

Attachment
20012743
L02000007722