

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

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

01-21-2003 90323 010 ****50.00

DOCUMENT # L02000016070

1. Entity Name

YELLOW BLUFF NORTH LLC



DO NOT WRITE IN THIS SPACE

20012742

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

DO NOT WRITE IN THIS SPACE

City & State

Clinton Township, MI

City & State

Clinton Township

4. FEI Number

30-0092094

Applied For

Not Applicable

Zip
48038

Country
U.S.A.

Zip
MI

Country
48038

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

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

**DO NOT WRITE
IN THIS SPACE**

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 - Michael F. Donohoe 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

30-0092094

TITLE

NAME

ADDRESS

CITY-ST-ZIP

Member

ANTHONY V. WILLIAMS

45000 River Ridge Drive, Suite 200

Clinton Township, MI 48038