L 11000066624

(Re	questor's Name)					
(Address)						
(Ad	dress)					
(Cit	ty/State/Zip/Phone	= #)				
PICK-UP	MAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	_ Certificates	of Status				
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RETARY OF STATE AHASSEE, FLORIDA

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COVER LETTER

TO: " Registration Section

INHS18 (2/14)

Division of Corporations						
SUBJECT: T4 INVESTORS, LLC	T4 INVESTORS, LLC					
	Name of Limited Liability Company					
Dear Sir or Madam:						
The enclosed Registered Agent/Registered Office	ee Change and fee(s) are submitted for filing.					
Please return all correspondence concerning this	matter to the following:					
M. RONALD KRONGOLD						
Name of Person						
Firm/Company						
201 ALHAMBRA CIRCLE, SUITE 514						
Address						
CORAL GABLES, FL 33134						
City/State and Zip Code						
MRKRONGOLD@GOLDKROWN.COM						
E-mail address: (to be used for future annu	al report notification)					
For further information concerning this matter, p	please call:					
ELLIE DAVIS	at () 416-4545					
Name of Person	Area Code & Daytime Telephone Number					
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314					
Enclosed is a check for the following amount:						
☑ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy					

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. N	ame of the limited liability company: T4 INVESTO	RS LI	_C			
2. (a)	31731 NORTHWESTERN HIGHWAY		(b) 31731 NORTHWESTERN HIGHWAY			
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	(0)_	Mailing address of limited liab (Note: MAY BE POST OF	-	
	SUITE 250W		ξ	SUITE 250W		
	FARMINGTON HILLS, MI 48334-1668		F	FARMINGTON HILLS, MI 48	334-1	668
	06/07/2011		F,	11000066624		
3.	Date of filing/registration in Florida	4.		Document number		
5. (a)	M RONALD KRONGOLD					
J. (a)	Registered Agent and Registered Office shown on the records of	the Flor	ida De	ept. of State:		
	1111 PARROT JUNGLE TRAIL					
	Registered Office Address (MUST BE FLORIDA STREET.	ADDRE	SS)			7
					5 5	SEC
	MIAMI	3313	2		HAY:	ARC!
	, гі	·		<u> </u>	26	SSAF
(b)	M RONALD KRONGOLD				PH	
, ,	Enter name of NEW Registered Agent and/or NEW Registered	Office	addre	ess:	$\ddot{\wp}$	ELO IS
	201 ALHAMBRA CIRCLE				29	ATE
	NEW Registered Office Address:			 -		
	SUITE 514					
	CORAL GABLES , FI	3313	34			
the ch agent was/w	limited liability company is not organized under the lar ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited li- rere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	f the re ability of the l	giste com imite	red office and the business office pany, it is hereby confirmed that ed liability company or as otherwi	of the :	registered
	11	M	1. R	ONALD KRONGOLD		
	ature of a member or authorized representative of a member	_		Printed or typed name of sig		
I here provis the ob to men notifie	eby accept the appointment as registered agent and ag ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide rely reflect a change in the registered office address, I d in writing of this change.	ree to c perfor ed for it hereby	act in man n Chi con	n this capacity. I further agree to ce of my duties, and I am familian apter 605, F.S. Or, if this docume firm that the limited liability comp	comply with a nt is b nany ha	with the and accept eing filed as been
Signat	dre of Kegistered Agent					
Jighay		D /-		70 H I 70 70 1 1		
	Division of Corporations P.O.	BOX 65	Z/•	rananassee. FL 32314		

FILING FEE: \$25.00