L19000062945

(Requestor's Name)					
(Address)					
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PICK-UP WAIT MAIL					
(Business Entity Name)					
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SECENOED.

A. BUTLER JUN 1 1 2022 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195					
REFERENCE : 791516 8378711					
AUTHORIZATION: Spelle Cleman					
COST LIMIT : '\$ 25:00					
ORDER DATE : July 7, 2022					
ORDER TIME : 10:32 AM					
ORDER NO. : 791516-008					
CUSTOMER NO: 8378711					
CHANGE OF AGENT					
NAME: OUR 2ND HALF, LLC					
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:					
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:					
CERTIFIED COPY XX PLAIN STAMPED COPY					
COMMACT DEDCOM. Alamaia Mailand DVM#					
CONTACT PERSON: Alexxis Weiland EXT#					

EXAMINER:

. , 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: OUR 2ND HAL	.F, LLC		
(u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	6001 SCHOONER DRIVE	6001	SCHOONER DRIVE	
	BELLEVILLE, MI 48111	BELLEVILLE, MI 48111		
	03/05/2019	L19000	0062945	
3.	Date of filing/registration in Florida		Document number	
5 (a)				
5. (a)	Registered Agent and Registered Office shown on the records of C T CORPORATION SYSTEM	f the Florida Dept. of	State:	
	Registered Office Address (MUST BE FLORIDA STREET	'ADDRESS)		
	1200 SOUTH PINE ISLAND ROAD	7100 KISIN	20 S	
	PLANTATION FI	33324 L	2022 JUL -7 SECREDAR	
(b)	Enter name of NEW Registered Agent and/or NEW Registered	d Office address:		
			AM 8: 57	
	Corporation Service Company		. FI	
	NEW Registered Office Address:		<u> </u>	
	1201 Hays Street			
	Tallahassee FI	32301		
change agent v was/w	imited liability company is not organized under the late or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited literation and affirmative vote of the members of the organization or the operating agreement of the	e registered office lability company, of the limited liab	and the business office of the registered it is hereby confirmed that the change(s) bility company or as otherwise provided in	
/s/ Ja	mes A. Moskal	James A. M	loskal, Manager	
Signa	ture of a member or authorized representative of a member		Printed or typed name of signee	
the obt to mer	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address. I d in writing of this change.	rec to act in this of performance of i ed for in Chapter hereby confirm th	capacity. I further agree to comply with the ny duties, and I am familiar with and accept 605. F.S. Or, if this document is being filed nat the limited liability company has been	
	Lhace Cokuby Tre of Registered Agent	Grace E. k	Cirby, Asst. Vice President	