3000

(Requestor's Name)				
	ddress)			
(~	addless)			
(A	ddress)			
(C	city/State/Zip/Phone #)			
PICK-UP	WAIT MAIL			
_				
(E	Business Entity Name)			
	San and Muse has			
(L	Document Number)			
Certified Copies	Certificates of Status			
Special Instructions to F	Filing Officer:			

Office Use Only



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Y 10/3/2022

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195				
REFERENCE : 966556 7487180				
AUTHORIZATION : Spelle reas				
COST LIMIT : \$ 25.00				
ORDER DATE : September 21, 2022				
ORDER TIME : 1:27 PM				
ORDER NO. : 966556-044				
CUSTOMER NO: 7487180				
CHANGE OF AGENT				
NAME: MERITOR HEAVY VEHICLE SYSTEMS, LLC				
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:				
CERTIFIED COPY XX PLAIN STAMPED COPY				
CONTACT PERSON: Alexxis Weiland				
FYAMTNED/C INTETACC.				

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.

2. (a)	2135 W. MAPLE RD.	(b) 2135 W. MAPLE RD.		
(,	Principal office address of limited liability company (<i>Note: MUST BE STREET ADDRESS</i>)	;	· /	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	TROY, MI 48084		TROY, M	MI 48084
			_	
	02/09/2000		M000000	000258
3.	Date of filing/registration in Florida	4.		Document number
5. (a)				
), (u)	Registered Agent and Registered Office shown on the record	ds of the Florid	a Dept. of St	ale:
	C T CORPORATION SYSTEM			
	Registered Office Address (MUST BE FLORIDA STRE	EET ADDRES.	<u></u>	_
	1200 SOUTH PINE ISLAND ROAD			2022
	PLANTATION	33334		1022 S.S.
		. FL_33324_		ယ်
(1.)				Ō
(b)	Enter name of NEW Registered Agent and/or NEW Regist	tered Office ad	dress:	-
			<u></u>	
	Corporation Service Company			- 5
	NEW Registered Office Address:			_
	1201 Hays Street			_
	Tallahassee	. FL ³²³⁰¹		
:hange igent w vas/we	mited liability company is not organized under the or changes are made, the Florida street address of ill be identical. Or, in the case of a Florida limite re authorized by an affirmative vote of the memberles of organization or the operating agreement of	the registered liability coers of the lim	ed office ar ompany, it i tited liabili	nd the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in
/s/ 1	/s/ Jill Cilmi Jill Cilmi, Autho		orized Person	
	are of a member or authorized representative of a member			Printed or typed name of signee

Signature of Registered Agent

Grace E. Kirby, Asst. Vice President