## M0500006533

(Requestor's Name)						
(Address)						
(Address)						
(Address)						
(Cit	ry/State/Zip/Phone	e #)				
PICK-UP	☐ WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	_ Certificates	s of Status				
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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Matthew Ermak meghan.groom@cscglobal.com

Date: August 21, 2020

Order#: 398379-015

Re: RANIR, LLC

Enclosed please find:

 $\underline{XX}$  Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Matthew Ermak

c/o Corporation Service Company

251 Little Falls Drive Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

OUCA.XCOA

## 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.	Na	me of the limited liability company:			
2. (	a)	4701 EAST PARIS AVE		(b)	4701 EAST PARIS AVE
2. (	<u>.</u>	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		(0)	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
		GRAND RAPIDS, MI 49512			GRAND RAPIDS, MI 49512
		11/22/2005		ľ	M05000006533
<ol> <li>3.</li> <li>5.</li> </ol>	(a)	Date of filing/registration in Florida C T CORPORATION SYSTEM	4.	_	Document number
J. ,	(4)	Registered Agent and Registered Office shown on the records of 1200 SOUTH PINE ISLAND ROAD	the Flori	da	Dept. of State:
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			
		PLANTATION , FL	33324	<b>}</b>	
(	b)	Enter name of NEW Registered Agent and/or NEW Registered Corporation Service Company	Office	add	dress:
		NEW Registered Office Address:			
		1201 Hays Street			
		Tallahassee, FL	32301		
char ager was	nge it v /we	mited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia- ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	registe ability of the li	erec cor mi	d office and the business office of the registered mpany, it is hereby confirmed that the change(s) ited liability company or as otherwise provided in
		Todd Kingma	To	odo	d Kingma, Authorized Person
	_	ure of a member or authorized representative of a member			Printed or typed name of signee
prov the to m noti	visi obl iere fiec	by accept the appointment as registered agent and agroups of all statules relative to the proper and complete igations of my position as registered agent as provide the reflect a change in the registered office address. It is writing of this change	ee to a perfori d for in hereby	ct i nai : Ci coi	in this capacity. I further agree to comply with the ince of my duties, and I am familiar with and accept hapter 605, F.S. Or, if this document is being filed infirm that the limited liability company has been
		re of Registered Agent poration Service Company Grace E. Kirby, Asst. Vi  Division of Corporations P.O.			

FILING FEE: \$25.00

INHS18 (2/14)