## #1105000006927

	Requestor's Name)	<u></u>
·	,	
( <i>F</i>	\ddress)	
( <i>F</i>	Address)	
(0	City/State/Zip/Phone #	f)
PICK-UP	WAIT	MAIL
(E	Business Entity Name	)
(L	Document Number)	
Certified Copies	Certificates o	f Status
Special Instructions t	o Filing Officer:	
.,	<b>y</b>	

Office Use Only



900221958709

12 FEB 15 AM 10: 57

FILED 2 FEB 15 MM 9: 56

KSALY EXAMINER FEB 1 6 2012



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I2000000195

REFERENCE : 093882

AUTHORIZATION

COST LIMIT

ORDER DATE: February 13, 2012

ORDER TIME : 9:38 AM

ORDER NO. : 093882-006

CUSTOMER NO: 7870092

## CHANGE OF AGENT

NAME: KANCOV INVESTMENT GP LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_ CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Stephanie Milnes

EXAMINER'S INITIALS:

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

Pursuant to the provisions of sections 608.416 or 608.508, 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. Name of the limited liability company: KANCOV I	NVESTMENT GP LLC		
2. (a) Principal office address of limited liability compa (Note: MUST BE STREET ADDRESS)	nny: 27750 Stansbury, Suite Farmington Hills, MI	200 48334	
(b) Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)		12 F 88 15	
12/15/2005	M05000006927	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
3. Date of filing/registration in Florida	4. Document number		
		<b>3</b>	
5. (a) Registered Agent and Registered Office shown of		Dept. of State:	
Registered Agent:	NRAI Services, Inc.		
Registered Office Address:	515 E. Park Avenue		
	Tallahassee, FL 32301	<u>.</u>	
NEW Registered Agent:		Corporation Service Company	
NEW Registered Agent:			
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1201 Hays Street		
1,1,2,0,1,2,1,2,1,2,1,2,1,2,1,2,1,2,1,2,	Tallahassee	,FL_32301	
If the limited liability company is not organized under the that after the change or changes are made, the Florida stroffice of the registered agent will be identical. Or, in the hereby confirmed that the change(s) was/were authorized liability company or as otherwise provided in the articles limited liability company.  (Signature of a member or authorized representative of a member)	eet address of the registered case of a Florida limited lid d by an affirmative vote of t	l office and the business ability company, it is he members of the limited.	
Maureen Cathell, Authorized Person			
(Printed or typed name of signee)  I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the pam familiar with and accept the obligations of my positions. Or, if this document is being filed to merely reflect confirm that the limited liability company has been notified.  By:  (Signature of Register (Agent) Corporation Service Company		ly. I further agree to mance of my duties, and I ovided for in Chapter 608, ffice address, I hereby	
(Signature of Register of Agent) Corporation Service Company	Sylvia Queppet, Asst. Vic	e President	

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00