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(Address)					
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PICK-UP WAIT MAIL					
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S. WARREN 0CT 1 0 2017



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Marissa Rather-lopez marissa.pitts@cscglobal.com

Date: October 6, 2017

Order#: 848094-002

Re: EQUIVEST FINANCIAL, LLC

Enclosed please find:

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: Marissa Rather-lopez 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.

QUCA.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. 1	Name of the limited liability company: <u>EQUIVEST</u>	Γ FINANCIAL, L	LC		
2 (a)	241 E Saginaw	(b)	(b) PO Box 980		
(Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BON)		
	East Lansing, MI 48823		East Lansing, MI 48826		
	04/07/2009		M09000001340		
3.	Date of filing/registration in Florida	4.	Document	t number	
5. (a	C T Corporation System				
·	Registered Agent and Registered Office shown on the recor	rds of the Florida D	lept, of State:		
	1200 South Pine Island Road				
	Registered Office Address (MUST BE FLORIDA STRI	EET ADDRESS)			
	Plantation	, FL <u>33324</u>		<u>-</u>	
(b	Corporation Service Company			100 r	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Regis</u>	<u>tered Office addra</u>	PSS:	FILED 7 OCT 10 PM	
	1201 Hays Street				
	NEW Registered Office Address:			1: 25 STATE LORIDA	
	Tallahassee	, FL_32301_			
the cl agent was/v	limited liability company is not organized under the hange or changes are made, the Florida street addressill be identical. Or, in the case of a Florida limit were authorized by an affirmative vote of the membiticles of organization or the operating agreement of	ess of the registe led liability com- pers of the limite of the limited liab	red office and the bi pany, it is hereby co ed liability company bility company.	usiness office of the registered onfirmed that the change(s) or as otherwise provided in	
Signature of a member or authorized representative of a member			Jill Cilmi, Authorized Person Printed or typed name of signee		
l her provi, the ol to me notifi	eby accept the appointment as registered agent and sistens of all statutes relative to the proper and completions of my position as registered agent as proved rely reflect a change in the registered office addressed in writing of this change.	olete performan ovided for in Ch ss, I hereby conj	this capacity. I fur ce of my duties, and apter 605, F.S. Or, firm that the limited	ther agree to comply with the I am familiar with and accept if this document is being filed Tiability company has been	
Signa	ture of Registered Agent Corporation Service Compa	my – BY: Gra	ce E. Kirby, Asst.	Vice President	

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