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PICK-UP	☐ WAIT	MAIL							
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Certified Copies	_ Certificates	of Status							
Special Instructions to	Filing Officer:								

Office Use Only



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TILED SECRETARY OF STATE SECRETARY OF STATE

JIM O O ZMERIS



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Tecora Bell tecora.bell@cscglobal.com

Date: June 6, 2017

Order#: 659950-067

Re: UNIVERSITY LENDING GROUP, 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: Tecora Bell

c/o Corporation Service Company
2711 Centerville Road, Suite 400

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.	Na	me of the limited liability company: UNIVERSITY	LENDING	GROUP,	LLC	•		
2.	(a)	42452 Hayes Suite 1  Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
		Clinton Twp. MI 48038	_					
		08/16/2011	<del></del>	M11000				<del></del>
3.		Date of filing/registration in Florida	4.		Document number			
5.	(a)	C T CORPORATION SYSTEM			_			
	, ,	Registered Agent and Registered Office shown on the records o	f the Florida	Dept. of Sta	ite:			
		1200 SOUTH PINE ISLAND ROAD						
		Registered Office Address (MUST BE FLORIDA STREET	ADDRESS	<u>}</u>	_	<b>—</b>	<b>^</b>	
	,					SE	2017	de Table
		PLANTATION ,, F	L <u>33324</u>			AHASS	- NUL	
	(L)	Corporation Service Company					<b>8</b>	
	(b)	Corporation Service Company  Enter name of NEW Registered Agent and/or NEW Registere	d Office add	lress:	_	THE CO	P	्राष्ट्र इ.क.
		1201 Hays Street				OF STATE	3: 22	the state of the s
		NEW Registered Office Address:			_			
		Tallahassee F	և 32301		_			
the ag	e cha ent v as/we	imited liability company is not organized under the launge or changes are made, the Florida street address of its identical. Or, in the case of a Florida limited large authorized by an affirmative vote of the members cless of organization or the operating agreement of the	aws of the of the regis liability co of the lim e limited l	stered officempany, it ited liability co	ce and the business of is hereby confirmed ity company or as oth	ffice of that the	f the re e chan	egistered ge(s)
_	Signa	ture of a member or authorized representative of a member		,	Printed or typed name	of signe	e	
pr the to no	ovisi e obl mere tifie	by accept the appointment as registered agent and as cons of all statutes relative to the proper and completing igations of my position as registered agent as providely reflect a change in the registered office address, if in writing of this change.  The of Registered Agent Corporation Service Company	e performe led for in C I hereby co	ance of my Chapter 60 Onfirm tha	pacity. I further agre o duties, and I am fan 15, F.S. Or, if this do t the limited liability irby, Asst. Vice Pro	nttar w cumen compa	oith an t is bei ny has	with the d accept ing filed s been