

M 11 00000 4599

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

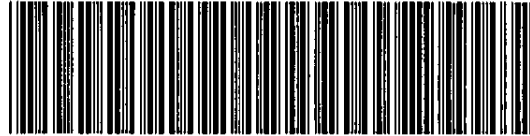
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



900269328159

02/16/15--01002--019 \*\*25.00

FILED  
15 FEB 16 AM 10:59  
TALLAHASSEE, FLORIDA

FEB 18 2015

C. CARROTHERS



CORPORATION SERVICE COMPANY

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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Sylvia Queppet squeppet@cscinfo.com

Date: February 12, 2015

Order#: 500849-001

Re: OLAMETER DPG, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.

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: Sylvia Queppet  
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. Name of the limited liability company: OLAMETER DPG, LLC

2. (a) \_\_\_\_\_ (b) \_\_\_\_\_

Principal office address of limited liability company:

**(Note: MUST BE STREET ADDRESS)**

Mailing address of limited liability company:

**(Note: MAY BE POST OFFICE BOX)**

4325 Concourse Dr

Ann Arbor, MI

48108

09/13/2011

Date of filing/registration in Florida

M11000004599

4.

Document number

5. (a) CT Corporation System

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address **(MUST BE FLORIDA STREET ADDRESS)**

1200 S Pine Island Rd

Plantation, FL 33324

(b) Corporation Service Company

Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

1201 Hays Street

**NEW** Registered Office Address:

Tallahassee, FL 32301

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

\_\_\_\_\_  
Signature of a member or authorized representative of a member

Dona Priebe, Authorized Representative

Printed or typed name of signee

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

\_\_\_\_\_  
Signature of Registered Agent

Corporation Service Company BY: Sylvia Queppet, Assistant VP

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

FILING FEE: \$25.00