M120000	3704
(Requestor's Name) (Address) (Address)	700329283877
(City/State/Zip/Phone #)	05/17/1901023018 ★★25.00
Certified Copies Certificates of Status	FILED 19 HAY 17 PH 2: 10 SELVE INFERENCE STATE FALL SHASSEE FLORIDA
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CSC CSC - WILMINGTON 251 Little Falls Drive Wilmington De 19808 800-927-9800 302-636-5454 FAX TO: REGISTRATION SECTION DIVISION OF CORPORATIONS From: Ami Casper ami.casper@cscglobal.com May 15, 2019 Date: Order#: 738581-004 Re: MARKETPLACE HOUSING, L.L.C. Enclosed please find: Change of Registered Agent and Office. <u>XX</u>____ XX____ Check in the amount of \$25___. Please take the following action: <u>XX</u> File in your office on a routine basis. XX ____ Issue Proof of Filing. Please return evidence to the following: XX____ Attn: Ami Casper 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.

(a)	17197 Laurel Park Dr., #340		(b)			
·	Principal office address of limited liability company: (<i>Note: MUST BE STREET ADDRESS</i>)			Mailing addre	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BON)	
	Livonia MI 48	197				
	06/21/2012			112000003704		
	Date of filing/registration in Florid	da	4.	Document	number	
(a)	C T Corporation System	li di seconda di second				
	Registered Agent and Registered Office shown on th	ne records of	the Florida De	pi, of State:	19	
	1200 South Pine Island Road					
	Registered Office Address (MUST BE FLORID	ASTREET	ADDRESS ₁			
	Plantation	, FL	. 33324		PH 2:	
(b)	Corporation Service Company				H 2: 10	
(~)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u>	(Registered	Office addres	<u>×:</u>		
	1201 Hays Street					
	NEW Registered Office Address:					
		1				

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.

/s/ Jill Cilmi

ee moning company.

Signature of a member or authorized representative of a member

Jill Cilmi, Authorized Person 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.

Climker

Signature of Registered Agent Corporation Service Company BY: Ami M. Casper, Asst. Vice President

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