

7/11/2014 10:22:39 From: To: 8506176383

(1/4)

Division of Corporations

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M13000006815

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H14000164758 3)))



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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
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DIVISION OF CORPORATIONS
14 JUL 11 AM 9:34

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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RECEIVED
14 JUL 11 AM 10:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LLC REGISTERED AGENT CHANGE
LANTANA CASCADE GP, LLC

Certificate of Status	0
Certified Copy	0
Page Count	015
Estimated Charge	\$25.00

C. LEWIS
JUL 14 2014
EXAMINER

RE-SUBMIT

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date of original filing
date of submission 7/9

7/11/2014 10:22:39 From: To: 8506176383

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850-617-6381 7/11/2014 9:53:23 AM PAGE * 1/001 Fax Server



July 11, 2014

FLORIDA DEPARTMENT OF STATE
Division of Corporations

LANTANA CASCADE GP, LLC
31200 NORTHWESTERN HIGHWAY
FARMINGTON HILLS, MI 48334

SUBJECT: LANTANA CASCADE GP, LLC
REF: M13000006815

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The registered agent must sign accepting the designation.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Carolyn Lewis
Regulatory Specialist II

FAX Aud. #: H14000164758
Letter Number: 914A00014815

RE-SUBMIT

Please refrain from filing
date of submission 7/9

RECEIVED

14 JUL 11 AM 10:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Lantana Cascade GP LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ross H. Parrish

Name of Person

Firm/Company

31200 Northwestern Highway

Address

Purvington Hills, MI 48334

City/State and Zip Code

pwojciechowski@rhp-properties.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Patricia Wojciechowski

at (248)

626-0737

Name of Person

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

LNHS18 (2/14)

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 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

14 JUL 9 AM 9:36

**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: Lantana Cascade GP, LLC
2. (a) 31200 NORTHWESTERN HIGHWAY
 Principal office address of limited liability company:
 (Note: MUST BE STREET ADDRESS)
FARMINGTON HILLS, MI 48334
- (b) 31200 NORTHWESTERN HIGHWAY
 Mailing address of limited liability company:
 (Note: MAY BE POST OFFICE BOX)
FARMINGTON HILLS, MI 48334
3. 10/28/2013
 Date of filing/registration in Florida
4. MI3000006815
 Document number
5. (a) CORPORATION SERVICE COMPANY
 Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
1201 HAYS STREET
 Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
TALLAHASSEE, FL 32301
- (b) CT Corporation System
 Enter name of NEW Registered Agent and/or NEW Registered Office address:
NEW Registered Office Address:
1200 South Pine Island Road
Plantation, FL 33324

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]
 Signature of a member or authorized representative of a member

Rosa H. Parrish
 Printed or typed name of signer

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.

By: [Signature]
 Signature of Registered Agent

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

IN318 (2/14)

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 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
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