M1500000 9963

(Requestor's Name)					
(Address)					
(Ad	dress)				
(Cit	y/State/Zip/Phone	#)			
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificates	of Status			
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COVER LETTER

	Registration Section Division of Corporations		
SUBJEC	RR Real Estate LLC		
		Name of Limited Lic	bility Company
Dear Sir	or Madam:		
The encl	osed Registered Agent/Registered (Office Change and f	ce(s) are submitted for filing.
Please re	sturn all correspondence concerning	g this matter to the fo	ollowing:
Lindsey .	Jager		
	Name of Person		_
Warner 8	Norcross * Judd LLP		
	Firm/Company		-
150 Otta	wa Ave NW, Suite 1500		
	Address		_
Grand Ra	apids, MI 49503		
•	City/State and Zip Cod	l¢	_
E-r	nail address: (to be used for future	annual report notific	eation)
For furth	ner information concerning this mat	ter, please call;	
Lindsey	Jager	616 at (752-2297
	Name of Person		Area Code & Daytime Telephone Number
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
	Enclosed is a check for the follow	ing amount:	
	S25 Filing Fee	□ \$5	5 Filing Fee & Certified Copy

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. N	ame of the limited liability company: RR Real Estate L	LC 		<u> </u>	
2. (a)		(t	o)		
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		1	Mailing address of limit (Note: MAY BE PO	• • •
	1500 W Big Beaver Rd, 2nd Floor		5800 Grati	iot Road, Suite 201	
	Troy, MI 48084		Saginaw, M	MI 48638	
	12/11/2015		M1500000	09963	
3.	Date of filing/registration in Florida	_ 4.		Document number	
5. (a	Bryan Pukoff				
5. (u	Registered Agent and Registered Office shown on the records of	the Florida	a Dept. of State	e:	
	Registered Office Address (MUST BE FLORIDA STREET	ADDRES:	<u> </u>	_	
	6645 Willow Park Dr. #150	6645 Willow Park Dr. #150			20
	Naples . FI	34109		_	23 H/
	Stacie Kwaiser			_	2023 HAR - 3
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:			_	
					Ç⊓ Ç⊓
				_	0
	NEW Registered Office Address:				
	9420 Bonita Beach Rd, Suite 200			_	
	Bonita Springs , FI	34135			
chang agent was/v the ar	limited liability company is not organized under the large or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members of the operating agreement of the year. E. Paym	register ability co of the lin limited	ed office and impany, it is nited liability	d the business offic s hereby confirmed y company or as of npany.	e of the registered that the change(s)
	adure of a member or authorized representative of a member			Printed or typed name	of signee
provis the old to me notific	eby accept the appointment as registered agent and agrisions of all statutes relative to the proper and complete oligations of my position as registered agent as provide rely tablect a change in the registered office address. I sed in writing of this change. Static waster	ree to acc perform d for in (hereby c	t in this cape ance of my t Chapter 605 onfirm that	acity. I further agr duties, and I am far 5, F.S. Or, if this do the limited liability	ee to comply with the niliar with and accept ocument is being filed company has been
Signa	ure of Registered Agent				