42000000118

(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:							
J. HORNE							
JUL 2 6 2024							

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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195							
REFERENCE : 560437 8170817							
AUTHORIZATION :							
COST LIMIT : \$ 25.0							
ORDER DATE : July 23, 2024							
ORDER TIME : 2:48 PM							
ORDER NO. : 560437-020							
CUSTOMER NO: 8170817							
CHANGE OF AGENT							
NAME. CHOIM DICTIC DOCC IIC							
NAME: STOUT RISIUS ROSS, LLC							
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:							
CERTIFIED COPY XX PLAIN STAMPED COPY							
CONTACT PERSON: Shauna Godbolt							
EXAMINER'S INITIALS:							

" 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	ame of the limited liability company: STOUT RISIU	S ROSS.	LLC		
2. (a)		,	b)		
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(Mailing address of limited (Note: MAY BE POST	
	150 W 2 ST STE 400		150 W 2 S	ST STE 400	
	ROYAL OAK, MI 48067		ROYAL OAK, MI 48067		
	04/29/2020		M2000000	94118	
3.	Date of filing/registration in Florida	4.	-	Document number	
5. (a)					
J. (a)	Registered Agent and Registered Office shown on the records of	of the Florid	a Dept. of State	• •	
	Welborn, Lee, Managing Director				
	Registered Office Address (MUST BE FLORIDA STREE)	T ADDRES	<u>s)</u>	-	~1
	201 S Biscayne Blvd 28th Fł				2 624 J
	Miami	33131		-	
				•	8
(b)				_	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	ed Office ac	<u>ldress</u> :		日間に
	Corporation Service Company				
	NEW Registered Office Address:			•	
	1201 Hays Street			-	
	Tallahassee, F	L 32301			
change agent v was/we	imited liability company is not organized under the last or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited large authorized by an affirmative vote of the members cles of organization or the operating agreement of the	e register iability co of the lin	ed office and ompany, it is nited liability	I the business office hereby confirmed the company or as other	of the registered nat the change(s)
151	Stephanie Clifford	Ste	phanie Cliffo	ord, Authorized Perso	on
Signa	ture of a member or authorized representative of a member			Printed or typed name o	l'signee
provisi the obl to mere notified	by accept the appointment as registered agent and ag ons of all statutes relative to the proper and complete igations of my position as registered agent as providely reflect a change in the registered office address, I I in writing of this change.	gree to act e perform ed for in C hereby c	t in this capa ance of my d Chapter 605, onfirm that ti	wity. I further agree luties, and I am fami F.S. Or, if this doct he limited liability co	to comply with the liar with and accept ument is being filed ompany has been
	Drace L-Kirby /s/GRACE E	E. KIRBY	, ASST. VIC	CE PRESIDENT	

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00 560437-20