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(850) 656-4724 3458 lakesore Drive Tallahassee, FL 32312

01/03/2024

D	ate:	01/03/2024	- will
		Acc#I20160000072	2 4: () 5 V
Name:	TME-TPA-	-1005 LLC	
Document #:			
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Thank you!

COVER LETTER

Division of Corporations	
TME-TPA-1005 LLC SUBJECT:	
	Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Ch	ange and fee(s) are submitted for filing.
Please return all correspondence concerning this matt	ter to the following:
Ashley Sellers	
Name of Person	
Barnes & Thornburg LLP	
Firm/Company	
24 Frank Lloyd Wright Dr., Suite A-3300, PO Box 511	
Address	•
Ann Arbor, Michigan 48105	
City/State and Zip Code	
Ashley.Sellers@btlaw.com	
E-mail address: (to be used for future annual re	port notification)
For further information concerning this matter, please	e call:
Ashley Sellersat (734 489-8023
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 following amou	int:
\$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy
INHS18 (2/14)	

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)		(b)		<u> </u>		
(,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
	454 Hawthorne Street		454 Hawthorne Street			
	Birmingham, MI 48009		Birminghar	n, MI 48009		
	01/11/2023	Ν	123000000	410		
	Date of filing/registration in Florida	4.		Document number		
(a)						
(•••)	Registered Agent and Registered Office shown on the records	of the Florida I	ept, of State	- ::		
	Cogency Global Inc.					
	Registered Office Address (MUST BE FLORIDA STREE	ET ADDRESS)		-		
	115 N. Calhoun St., Suite 4			<i>U</i> ₩		
	Tallahassee	32301		1024 JAH - 3		
	Tallahassee	rL				
(b)						
(0)	Enter name of NEW Registered Agent and/or NEW Registe		<u>'ess</u> :			
	C T Corporation System			13:06 PATE		
	NEW Registered Office Address:			. E		
	1200 South Pine Island Road			-		
	Plantation	FL_33324		_		
ange ent v as/w c art	imited liability company is not organized under the or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the member icles of organization or the operating agreement of the control o	the registered I liability com rs of the limit the limited lia	office and spany, it is ed liability bility com	I the business office of the registered hereby confirmed that the change(s) y company or as otherwise provided i		
	ture of a member or authorized representative of a member	Joseph ———	Hessling	Printed or typed name of signce		
٠.				ringed of typed haine of Signee		

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

Nichol McCroy, Assistant Secretary

Numb McCox Signature of Registered Agent