P12751

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07 AUG 29 PH 2: 42 SECRETARY OF STATE TALLAHASSEE, FLORID

RA Charge

C. Coulliette AUG 2 9 2007



ACCOUNT NO. : 072100000032 REFERENCE AUTHORIZATION C COST LIMIT ORDER DATE: August 24, 2007 ORDER TIME : 11:57 AM ORDER NO. : 071054-645 CUSTOMER NO: 7602908 CHANGE OF AGENT NAME: DEAN REALTY COMPANY OF MICHIGAN PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: _ CERTIFIED COPY XX PLAIN STAMPED COPY

EXAMINER'S INITIALS:

CONTACT PERSON: Debbie Skipper

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	ange is submitted for a corporation	7.0502, 607.1508, or 617.1508, Florida Statutes, this organized under the laws of the State of Michigan registered agent, or both, in the State of Florida.	-
		Y COMPANY OF MICHIGAN	
2. The principal	office address:		
	nfield Hills Parkway, Suite 300		
3. The mailing a	address (if different):		
4. Date of incor	poration/qualification: 01/02/198	7 Document number: P12751	
	d street address of the current registertment of State:	ered agent and registered office on file with the	
	C T Corporation System		
	1200 South Pine Island Road		C
	Plantation, FL 33324	SECRI ALLA	7 AUG
6. The name and (if changed):	d street address of the new registere	SECRETARY OF SEE TARY OF SEE T	07 AUG 29 PH
	Corporation Service Company	y n	2:42
	1201 Hays Street		4 5
	(P.O. Box NOT acc	ceptable)	
	Tallahassee, FL 32301		
The street addr	ess of its registered office and the l be identical.	street address of the business office of its registered agen	.t,
	as authorized by resolution duly a he board, or the corporation has be	dopted by its board of directors or by an officer so een notified in writing of the change.	
Kathi	ure of an officer or director)	Kathy L. Yetter, Attorney in Fact (Printed or typed name and title)	.
I hereby accept I further agree of my duties, ar document is be corporation ha	/ t the annointment as registered ag	ent and agree to act in this capacity. Il statutes relative to the proper and complete performan he obligation of my position as registered agent. Or, if the e in the registered office address, I hereby confirm that the hange. 08/27/2007	ce iis ie
	gnature of Registered Agent)	(Date)	
If signing on be	ehalf of an entity:		
Elizabeth A. l	Dawson, Asst. Vice President		
(Typed or Printed Name)		

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

* * * FILING FEE: \$35.00 * * *

CR2E045 (8/05)