

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000091177

Entity Name: 6266 MIDNIGHT PASS, LLC

Current Principal Place of Business:

120 N GLENHURST
BLOOMFIELD VILLAGE, MI 48301

Current Mailing Address:

120 N GLENHURST
BLOOMFIELD VILLAGE, MI 48301 US

FEI Number: 46-0638840

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NRAI SERVICES, INC
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Authorized Person(s) Detail :

Title MGR
Name LAVENS, KAREN
Address 120 N GLENHURST
City-State-Zip: BLOOMFIELD VILLAGE MI 48301

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KAREN LAVENS

MANAGER

02/14/2017

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date