

2020 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M16000005459

Entity Name: TESSELLATE, LLC**Current Principal Place of Business:**600 E. LAFAYETTE BLVD
DETROIT, MI 48226**Current Mailing Address:**600 E. LAFAYETTE BLVD
DETROIT, MI 48226 US**FEI Number:** 45-3742721**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
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	CONTROLLER - STATUTORY REPORTING
Name	JASON, PISARIK
Address	P.O. BOX 40725
City-State-Zip:	LANSING MI 48901

Title	P
Name	GUHR, SHANNON KATIE
Address	4121 COX ROAD 200
City-State-Zip:	GLEN ALLEN VA 23060

Title	TREASURER
Name	PHILLIPS, ANTHONY
Address	200 N GRAND AVENUE
City-State-Zip:	LANSING MI 48933

Title	SECRETARY
Name	BOBBI, ELLIOT
Address	200 N GRAND AVENUE
City-State-Zip:	LANSING MI 48933

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: ANTHONY PHILLIPS

TREASURER

02/06/2020

Electronic Signature of Signing Authorized Person(s) Detail_____
Date