

## CERTIFICATE OF CHANGE OF REGISTERED OFFICE AND/OR RESIDENT AGENT For use by DOMESTIC LIMITED LIABILITY COMPANY

Pursuant to the provisions of Act 23, Public Acts of 1993 (limited liability companies) the undersigned executes the following Certificate:

The identification numb	er assigned by the Bureau is:	802772138	
The name of the limited liability company is:		EMERALD J ESTATES, LLC	$\wedge$
			$\checkmark$
The name of the resident agent on file with the Bureau is :		JADE FOX	
The location of the registered office on file with the Bureau is:		32058 CARLISLE PKWY ,WAYNE, MI, 48184	$\bigcirc$
The mailing address of	the above office on file with the Burea	u is: 31590 SCHOOLCRAFT RD, LIVONIA, MI, 48150-1805	$\widehat{}$
	rmation as it should now appear on th the registered office and the name o JADE FOX 32058 CARLISLE PKWY	ne public record. If the resident agent at the registered office (P.)	<ol> <li>Boxes are not acceptable):</li> </ol>
City:	WAYNE		
State:	MI	Zip Code: 48184	
Registered Office Mailin	g Address:		
P.O. Box or Street Address:	32058 CARLISLE PKWY		
Apt/Suite/Other:			
City:	WAYNE		
State:	MI	Zip Code: 48184	
only the address of the 2.NONPROFIT CORPORA operating agreement, a	e registered office is changed, in which ATIONS ONLY: the incorporators, only	ed by: 1. ALL CORPORATIONS: its Board of Dire in case a copy of this statement has been mailed if no board has been appointed. 3. LIMITED LIAE embers pursuant to section 502(1), managers pr e is changed.	I to the corporation.
The corporation or limi as changed, are identic		at the address of its registered office and the ac	Idress of its resident agent
This document must be liability companies).	signed by an authorized officer or age	ent (corporations) or a member, manager, or an	authorized agent (limited
Signed this 3rd Day of	December, 2021 by:		
Signature		Title Title if "	'Other'' was selected

By selecting ACCEPT, I hereby acknowledge that this electronic document is being signed in accordance with the Act. I further certify
that to the best of my knowledge the information provided is true, accurate, and in compliance with the Act.

Authorized Agent

Jade Fox

j n Decline	jn Accept

## MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS

## FILING ENDORSEMENT

## *This is to Certify that the* CERTIFICATE OF CHANGE OF REGISTERED OFFICE AND/OR RESIDENT AGENT

for

EMERALD J ESTATES, LLC

*ID Number:* 802772138

received by electronic transmission on December 03, 2021, is hereby endorsed.

*Filed on* December 03, 2021, *by the Administrator*.

The document is effective on the date filed, unless a subsequent effective date within 90 days after received date is stated in the document.



In testimony whereof, I have hereunto set my hand and affixed the Seal of the Department, in the City of Lansing, this 3rd day of December, 2021.

Jinda '

Linda Clegg, Director Corporations, Securities & Commercial Licensing Bureau