DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LIMITED LIABILITY COMPANY ANNUAL STATEMENT



Due February 15, 2020

File Online at www.michigan.gov/corpfileonline

Identification Number

Limited Liability Company Name

801845500

35 SOUTH TIC LLC

1 Resident agent name and mailing address of the registered office

MATTHEW B LESTER 2550 TELEGRAPH ROAD SUITE 200 BLOOMFIELD HILLS, MI 48302 Change resident agent and/or mailing address of registered office in MICHIGAN (can be a P O Box)

MAR 13 2020

1 843

CORPORATIONS DIVISION

2 The address of the registered office

2550 TELEGRAPH ROAD SUITE 200 **BLOOMFIELD HILLS, MI 48302** Change address of registered office in MICHIGAN (MICHIGAN address number, street, city, state, zip, cannot be a P.O. Box).

3. Signature of authorized member, manager or agent.

Prisidel

Phone (Optional)

Marthu R

Annual Statement Must Be Signed (Item 3 above)

Domestic: Signature of a manager if management is vested in managers, by at least 1 member if management remains in the members or by an authorized agent of the domestic limited liability company

Foreign: Signature of a person with authority to do so under the laws of the foreign limited liability company's jurisdiction of organization.

Filing Fee: \$25.00

Annual Statement must be received by agency on or before February 15, 2020.

Veterans: Pursuant to MCL 450 5101(9)(10), if a majority of the membership interests in the limited liability company responsible for paying the fee are held by 1 or more veterans who served in the United States Armed Forces. (including the reserve components) who were discharged or released under conditions other than dishonorable, you may obtain further information regarding a fee waiver at www.michigan.gov/corpveteranfeewaivers

Submit

Online: www.michigan.gov/corpfileonline

Save time by filing online. You will get an immediate response and you can elect to receive future notices by email to the resident agent. The agent will also be sent an email when a document is filed, or the CID/PIN is requested. You will need your Customer ID number (CID) and PIN, which can be obtained using the CID/PIN Recovery Page at www.michigan.gov/corppin.

Mail: Return completed statement with a check or money order payable to the State of Michigan to: Corporations Division, P.O. Box 30768, Lansing, MI 48909. (517) 241-6470