F13000001279

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
(Oity/State/2/p/Fillone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						





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01/13/15--01022--012 **35.00

15 JAN 13 AM 11: 50

'JAN 1 5 2015' T. CARTE**R**



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ben Beaver bbeaver@cscinfo.com

Date: January 9, 2015

Order#: 443316-015

Re: HURON VALLEY FINANCIAL, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35 .

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Ben Beaver

c/o Corporation Service Company
2711 Centerville Road, Suite 400

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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

statement of ch	provisions of sections 607.0502 ange is submitted for a corpora er to change its registered office	tion organized under the la	ws of the State of	Michigan	_
1. The name of	the corporation: HURON VALL	EY FINANCIAL, INC.			
	l office address: 2395 Oak Valle		bor, MI 48103		
3. The mailing	address (if different):				
4. Date of incor	poration/qualification: 03/22/2	013 Document	number: F13000)001279	
	d street address of the current re		ed office on file v	with the	
	CT Corporation System				
	1200 South Pine Island Road			_	
	Plantation	FL	33324	15 JAN	SECR!
6. The name and (if changed):			d /or registered o	office $\overline{\omega}$	FILED ETARY OF HASSEE!
	Corporation Service Compan	У		AH 11: 51	10.15 V1S
	1201 Hays Street	0.0.100		50	AGE
	Tallahassee	O. Box NOT acceptable	32301	_	
The street addr	ess of its registered office and l be identical.	the street address of the bu	siness office of i	its registered ag	ent,
	as authorized by resolution dul he board, or the corporation ha				
	X >-	Dona Priebe		Vice Preside	ent —
I further agree performance of agent. Or, if th hereby confirm	the appointment as registered to comply with the provisions of my duties, and I am familiar visit document is being filed mere that the corporation has been on Service Company	l agent and agree to act in of all statutes relative to th with and accept the obligat ely to reflect a change in th	e proper and con ion of my position he registered offi	mplete on as registered	
By: کمریت	gnature of Registered Agent	01/07/2015	Date		_
	chalf of an entity:		Date		
Sylvia Queppe	t, Assistant Vice President				
Т	Typed or Printed Name				