

|                                                                                                                                                        |               |                                                                                                                                                                              |              |                                                                    |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|--------------------------------------------------------------------|---------|-------------|--|
| No. <b>W 13446</b>                                                                                                                                     |               | <b>Due no later than Nov 30, 2017</b>                                                                                                                                        |              | 2. Registered Agent and Address <b>(NO PO BOX)</b>                 |         |             |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |               | <b>1. Mailing Address: Correct in this box if needed.</b><br><br>ADP TOTALSOURCE MI VI, LLC<br>SANDRA C GRISALES<br>10200 SUNSET DRIVE<br>ATTN: LEGAL DEPT<br>MIAMI FL 33173 |              | C T CORPORATION SYSTEM<br>921 S ORCHARD ST STE G<br>BOISE ID 83705 |         |             |  |
|                                                                                                                                                        |               |                                                                                                                                                                              |              | 3. <u>New</u> Registered Agent Signature:*                         |         |             |  |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.                                                           |               |                                                                                                                                                                              |              |                                                                    |         |             |  |
| Office Held                                                                                                                                            | Name          | Street or PO Address                                                                                                                                                         | City         | State                                                              | Country | Postal Code |  |
| MANAGER                                                                                                                                                | MARK ACQUADRO | 71 HANOVER ROAD                                                                                                                                                              | FLORHAM PARK | NJ                                                                 | USA     | 07932       |  |
| MANAGER                                                                                                                                                | BRIAN MICHAUD | 10200 SUNSET DRIVE                                                                                                                                                           | MIAMI        | FL                                                                 | USA     | 33173       |  |
| MANAGER                                                                                                                                                | BARRY EISLER  | 10200 SUNSET DR                                                                                                                                                              | MIAMI        | FL                                                                 | USA     | 33173       |  |
| MANAGER                                                                                                                                                | PAWAN CHHABRA | 5800 WINDWARD PKWY                                                                                                                                                           | ALPHARETTA   | GA                                                                 | USA     | 30005       |  |
| 5. Organized Under the Laws of:<br><br><b>MI<br/>W 13446</b>                                                                                           |               | 6. Annual Report must be signed.*<br>Signature: Barry Eisler<br>Name (type or print): Barry Eisler<br>Date: 11/29/2017<br>Title: Manager                                     |              |                                                                    |         |             |  |
| Processed 11/29/2017                                                                                                                                   |               | * Electronically provided signatures are accepted as original signatures.                                                                                                    |              |                                                                    |         |             |  |