

**Commonwealth of Kentucky**  
**Michael G. Adams, Secretary of State**

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Michael G. Adams  
KY Secretary of State  
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Secretary of State  
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**Statement of Change of  
Principal Office Address**

**POC**

Pursuant to the provisions of KRS 14A.5-010, the undersigned hereby applies to change the principal office on behalf of

**MCM MANAGEMENT CORP.**

and for that purpose submits the following statements:

**1. Address of current principal office**

2655 ORCHARD LAKE RD  
STE 101  
SYLVAN LAKE, MI 48320

**2. Principal office is hereby changed to:**

1154 MAPLELAWN  
TROY, MI 48084

**3. Authorized Signature of Entity**

*craig l sickmiller, CFO*

Signature and Title

craig l sickmiller, CFO

Type or print name and title

8/28/2024

Date