

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000198139

**Entity Name:** MSENSAFE SB-JV, LLC

**Current Principal Place of Business:**

5858 S. SEMORAN BLVD.  
ORLANDO, FL 32822

**Current Mailing Address:**

5858 S. SEMORAN BLVD.  
ORLANDO, FL 32822 UN

**FEI Number: 82-3059152**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

MSE GROUP, LLC  
5858 S. SEMORAN BLVD.  
ORLANDO, FL 32822 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name MSE GROUP, LLC  
Address 5858 S. SEMORAN BLVD.  
City-State-Zip: ORLANDO FL 32822

Title AMBR  
Name ENSAFE, INC.  
Address 5724 SUMMER TREES DRIVE  
City-State-Zip: MEMPHIS TN 38134

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: KELLIE E. TOMEO, ESQ.**

**SENIOR COUNSEL**

**04/30/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date