## L090000 55692

(Re	questor's Name)	· · ·
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☐ PICK-UP	WAIT	MAIL
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(Do	cument Number)	
Certified Copies	Certificates of Status	
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Special Instructions to	Filing Officer:	
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Office Use Only



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Vera M. Norris

Date: April 16, 2013

Order#: 606298/016

Re: MBSA 1, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Vera M. Norris c/o Corporation Service Company 2711 Centerville Road, Suite 400 Wilmington, DE 19808

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

INCA.XCOA

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608. liability company submits the following statement in ord agent, or both, in the State of Florida.	508, Florida Statutes, the unde er to change its registered offic	rsigned limited e or registered
1. Name of the limited liability company: MBSA 1, LLC		<b>注</b> 唐
(a) Principal office address of limited liability compan     (Note: MUST BE STREET ADDRESS)	y: 201 S. Biscayne Blvd.  26th Floor  Miami, FL 33131	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		2: 5 <b>8</b>
06/09/2009	L09000055692	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown on Registered Agent:	the records of the Florida Dept.  Jone's Walker	of State:
Registered Office Address:	201 S. Biscayne Blvd. 26th Floor Miami, FL 33131	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Office address:	
NEW Registered Agent:	Corporation Service Company	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1201 Hays Street	
· · · · · · · · · · · · · · · · · · ·	Tallahassee	FL 32301
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be iden liability company, it is hereby confirmed that the change(s the members of the limited liability company or as otherw the operating agreement of the limited liability company.  Signature of a member or authorized representative of a member	florida street address of the registical. Or, in the case of a Florida ) was/were authorized by an affir	tered office Timited rmative vote of
Dona Priebe, Authorized Person		
Printed or typed name of signee  I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my portion of the chapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability company.  By:		rther agree to of my duties, wided for in stered office this change.
Signature of Registered Agent Corporation Service Company	Sylvia Queppet, Asst. VP	
Division of Cornerations P.O. Roy 6	327 Tallahaceae FI 32314	

**FILING FEE: \$25.00**