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Division of Corporations **Electronic Filing Cover Sheet**

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J. BRYAN

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

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company:	Management Services, LLC						
2. (a) Principal office address of limited liability company:							
(Note: MUST BE STREET ADDRESS)	848 Brickell AVE, Suite 1200. Miami, FL 33131						
(b) Mailing address of limited liability company:							
(Note: MAY BE POST OFFICE BOX)							
1/4/2010	L10000000191 AV S						
3. Date of filing/registration in Florida	4. Document number						
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:							
Registered Agent:	Brenda Goerks						
Registered Office Address:	One Southeast 3rd Avenue 25th Floor Miami, FL 33131						
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :							
NEW Registered Agent:	Scott J Jordan						
NEW Registered Office Address: MUST BE FLORIDA STREET ADDRESS	c/o Tripp Scott PA 110 SE 6th St. Floor 15 Fort Lauderdale FL33301						
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 identifiability company, it is hereby confirmed that the change(s) of the members of the limited hability company or as other or the operating agreement of the limited liability company. Signature of a member of attention of a member Natalia Trushina 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 provisions of the provisions of all statutes relative to the provisions of the provisions of all statutes relative to the provisions of the pro	lorida street address of the registered office tical. Or, in the case of a Florida limited) was/were authorized by an affirmative vote rwise provided in the articles of organization /.						
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 pochapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability company. Signature of Registered Agent	ission as registered agent as provided for merely reflect a change in the registered office by has been notified in writing of this change.						

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00