L15000017439

| (Requestor's Name) (Address) | | | | | | | |
|---|--|--|--|--|--|--|-----------|
| | | | | | | | (Address) |
| (City/State/Zip/Phone #) | | | | | | | |
| PICK-UP WAIT MAIL | | | | | | | |
| (Business Entity Name) | | | | | | | |
| (Document Number) | | | | | | | |
| Certified Copies Certificates of Status | | | | | | | |
| Special Instructions to Filing Officer: | | | | | | | |
| | | | | | | | |
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Office Use Only



100275957591

100275957531 09/04/15--01007--031 **25.00

COVER LETTER

| то: | Registration Section Division of Corporations | | | | | | |
|-----------------------------------|--|----------------|---|--|--|--|--|
| SUBJE | MSM REAL ESTATE HOLD | INGS, LLO | С | | | | |
| Name of Limited Liability Company | | | | | | | |
| Dear Si | r or Madam: | | | | | | |
| The end | closed Registered Agent/Registered Off | ice Change a | and fee(s) are submitted for filing. | | | | |
| Please | return all correspondence concerning th | is matter to t | the following: | | | | |
| Gideo | n Gratsiani | | | | | | |
| | Name of Person | | | | | | |
| MSM Real Estate Holdings, LLC | | | | | | | |
| | Firm/Company | | | | | | |
| 975 N | orth Miami Beach Blvd. | | | | | | |
| | Address | | | | | | |
| North | Miami Beach, Florida 33162 | | | | | | |
| | City/State and Zip Code | | | | | | |
| bhshir | rel@fst26.com | | | | | | |
| E | -mail address: (to be used for future ann | ual report ne | otification) | | | | |
| For fur | ther information concerning this matter, | please call: | | | | | |
| Edwa | rd Moffa | 954 | 393 1333 | | | | |
| • | Name of Person | | Area Code & Daytime Telephone Number | | | | |
| | STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 | | MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 | | | | |
| | Enclosed is a check for the following amount: | | | | | | |
| | □ \$25 Filing Fee | ٥ | \$55 Filing Fee & Certified Copy | | | | |

INHS18 (2/14)

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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. Na | ame of the limited liability company: MSM REA | L ESTAT | E HOLDINGS, LLC | | | |
|-----------------------------|---|---|--|--|--|--|
| 2. (a) | 975 North Miami Beach Blvd. | (| PO BOX 820 | | | |
| | Principal office address of limited liability company: (Note: MUST_BE STREET ADDRESS) | | Mailing address of | limited liability company: E POST OFFICE BOX) | | |
| | North Miami Beach, Florida 33162 | | Hallandale , Florida 3 | 33008 | | |
| | 1 / 29 / 2015 | | L15000017939 | | | |
| 3. | Date of filing/registration in Florida | 4. | Document nur | nber | | |
| 5. (a) | Daniel Arkush | | | | | |
| | Registered Agent and Registered Office shown on the record 200 S. Biscayne Blvd Suite 1120 Registered Office Address (MUST BE FLORIDA STRE | <u> </u> | | | | |
| (b) | Miami | , FL_33131 | 33131 | | | |
| | Gideon Gratsiani Enter name of NEW Registered Agent and/or NEW Regist | <u> </u> | | | | |
| | 975 North Miami Beach Blvd | • | | | | |
| | NEW Registered Office Address: | | | | | |
| | North Miami Beach | , _{FL} _33162 | | | | |
| the cha agent v was/w | imited liability company is not organized under the inge or changes are made, the Florida street addres will be identical. Or, in the case of a Florida limite ere authorized by an affirmative vote of the membericles of organization or the operating agreement of | ss of the reg ed liability of ers of the li | stered office and the busing ompany, it is hereby confir- nited liability company or a | ess office of the registered med that the change(s) | | |
| | GOGO DIATENDI ture of a member or authorized representative of a member | | leon Gratsiani | | | |
| | ture of a member or authorized representative of a member by accept the appointment as registered agent and | | Printed or typed | · · | | |

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent