1/22/2020

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000025284 3)))



H200000252843ABCX

Note: DO NOT hit the REFRESH/RELOAD button on your browser from th	is page.
Doing so will generate another cover sheet	<u>s</u> :

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (954)208-0845

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email	Address:	
CIRALT	MUUI CSS.	 _

## LLC REGISTERED AGENT CHANGE MSBC NORTH CAROLINA, LLC

	S	Certificate of Status	0
	œ.	प्रिष्टि Certified Copy	1
		Page Count	03
		Estimated Charge	\$55.00
•	C) ().		
	==	THE STATE OF THE S	
	· ···,	12	

Electronic Filing Menu — Corporate Filing Menu

Helpo SIMMONS JAN 23 2020

## 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.

: 40	me of the limited lightitly contoaty:		·				
(a)	ame of the limited liability company:	(b)	)	rate Way Suite 30			
(a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		N	failing address of li (Note: MAY BE I	mited liabilit POST OFFI	y compan CE BOX	) 
	02/16/2017		L170000375				
	Date of filing/registration in Florida	4.		Document numb	ber		
(a)	Hill, Alexandria V						
(a)	Registered Agent and Registered Office shown on the records of	of the Florida	Dept. of State	:	i. SES	202	
	Registered Office Address (MUST BE FLORIDA STREET	TADDRESS	Ł			2020 JAN 22	ور سره
	340 Corporate Way Suite 300					<b>₹</b>	
	Orange Park , F	L 32073			CRETARY OF S TALLAHASSEE,		1
(b)	CT Corporation System			_		PM 12:	
(,	Enter name of NEW Registered Agent and/or NEW Registers	ed Office ad-	<u>tress</u> :		PATE	<u> </u>	
	NEW Registered Office Address:	·····		-			•
	1200 South Fine Island Road			-			
	Plantation	7L 33324		_			
	limited liability company is not organized under the lange or changes are made, the Florida street address					e chang	૯(S)
gent as/w e art kign	ange or changes are made, the riorida street address will be identical. Or, in the case of a Florida limited terr authorized by an affirmative vote of the members icles of organization on the operating agreement of the particle of a member of authorized representative of a member or authorized representative of a member or accept the appointment as registered agent and actions of all statutes relative to the proper and completely reflect a change in the registered office address.	s of the limited he limited	in this cap	y company or as apany.  Printed or typed a cacity. I further and I am	otherwise	omply w	eith (h

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