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LLC REGISTERED AGENT CHANGE MS MAN DEBT LLC

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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 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company stibmits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. N	ame of the limited liability company: MS MAN DEBI	TLLC					
)				
ž. (d)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Nate: MAY BE POST OFFICE BOX) 822 US HIGHWAY ATA N STE 208 PONTE VEDRA BEACH, FL 32082 L17000113066				
	822 US HIGHWAY ATA N STE 208						
	PONTE VEDRA BEACH, FL 32082						
	05/22/2017						
3.	Date of filing/registration in Florida	— 4.	1	Document nur	nber		
e 72							
5. (a	Registered Agent and Registered Office shown on the records of	of the Florida	Dept. of State:				
	WALKER, CHRISTOPHER A, ESQ						
	Registered Office Address (MUST BE FLORIDA STREET	T ADDRESS	<u></u>				
	822 N A1A STE 100						
	PONTE VEDRA BEACH, F	L_32082					
					<u>.</u>	1/2	
(b)	Enter name of NEW Registered Agent and/or NEW Registers				2	; <u>-</u> -	
	Enter name of NEW Registered Agent and/or NEW Registers	ed Office ad	<u>dress</u> :			1	
	NRAI Services, Inc.				•	**	ا ا ر
	NEW Registered Office Address:				÷.		- 7
	1200 South Pine Island Road				•	\$ \$	
						24	
	Plantation, F	FL					
the cl agent was/v	limited liability company is not organized under the lange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the members ticles of organization or the operating agreement of the	of the regardate of the links of the limited	estered office ompany, it is nited liability liability com	and the busing hereby confineration or a company or a company or a company.	rmed that as otherv	e or mo t the ch	ange(s)
	Steven Begleder		Steven L. Begleiter, Manager				
_	nature of a member or authorized representative of a member			Printed or typed			t talala
provi the of to me notifi By:	seby accept the appointment as registered agent and a sions of all statutes relative to the proper and comple bligations of my position as registered agent as providerely reflect a change in the registered office address, and in writing of this change. NRAI Services. Inc.	ded for in I hereby o	et in this cape nance of my e Chapter 605 confirm that i ssistant Secretary	, F.S. Or, if the limited lia	r agree t m famili his docu bility cor	o comp ar with nent is npany i	iy with the and accept being filed has been