From: Ranae McGraw



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Division of Corporations

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Account Name : C T CORPORATION SYSTEM

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LLC REGISTERED AGENT CHANGE MSSS LLC

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COLUMN CONTRACT

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. N	Same of the limited liability company: MSSS LLC				<u> </u>	
		(b)	<u> </u>		Ì	
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		M	ailing address of limited li (Note: MAYBE POST O		
	6474 GREENLAND CHASE BLVD		JACKSONVILLE, FL 32258			
	JACKSONVILLE, FL 32258					
	9/27/2019		L1900024472	6		
3.	Date of filing/registration in Florida	- 4.]	Document number	Ī	
5. (a	BACHU, MAHESHWAR				1	
J. (i	Registered Agent and Registered Office shown on the records of	f the Florida	Dept. of State:		ı	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					
	6474 GREENLAND CHASE BLVD					
	JACKSONVILLE, FI	L				
(b	C T Corporation System				1	
(0	Enter name of NEW Registered Agent and/or NEW Registered	d Office ad	<u>fress</u> :		- F	
	NEW Registered Office Address:				下上。配面 NAR 30 PM	
	1200 South Pine Island Road			<u>.</u>	કર્ યુ.1	
	Plantation, F	L_33324			₽	
the c agen	e limited liability company is not organized under the la hange or changes are made, the Florida street address of t will be identical. Or, in the case of a Florida limited l were authorized by an affirmative vote of the members rticles of organization or the operating agreement of th	iability co of the lin	stered office ompany, it is nited liability	hereby confirmed the company or as other	at the change(s	.)
/s/ Noah B. Mehrkam			h B. Mehrkan	n. Member	<u> </u>	
	nature of a member or authorized representative of a member			Printed or typed name of	1	
prov the o to me notif	reby accept the appointment as registered agent and agistions of all statutes relative to the proper and complet obligations of my position as registered agent as provide erely reflect a change in the registered office address, it ied in writing of this change.	zree to ac. e perform led for in l l hereby c	t in this cape cance of my o Chapter 605 onfirm that t	icity. I further agree luties, and I am Jamil , F.S. Or, if this docu he limited liability co	to comply with iar with and ac ment is being f impany has bec	i the scep filed an
	s/ Jennifer Kurz					
Signi	ature of Registered Agent Jennifer Kurz, Asst. Secretary		w 700 th 1	EL 2224	ı	
	Division of Corporations P.O.	Box 632	/● Lallahas:	sec, F.L. 52514	1	

INHS18 (2/14)

FILING FEE: \$25.00