## Ma30000591

(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:						

Office Use Only



000316412360

08/06/18--01834--016 \*\*25.00

ZOIBAUG -6 PM IZ: 09
SECRETARY OF STATI

JO410-18



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ashley Jiminez ashley.jiminez@cscglobal.com

Date: August 2, 2018

Order#: 330781-015

Re: MAS ASSOCIATES, LLC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX\_\_\_ Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Ashley Jiminez

c/o Corporation Service Company

251 Little Falls Drive Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

## 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	me of the limited liability company: MAS ASSOCIAT	ES, LLC		·····	
2.	(a)	66 PAINTERS MILL ROAD	_ (b)	66 PAIN	ITERS MILL ROAD	
		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		N	failing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
		STE 202	_	STE 202		
		OWINGS MILLS, MD 21117	-	OWINGS	MILLS, MD 21117	
		02/19/2003	_	M0300000	00591	
3.		Date of filing/registration in Florida	4.		Document number	
5.	(a)	C T CORPORATION SYSTEM				
		Registered Agent and Registered Office shown on the records of the	ie Florida i	Dept. of State	:	
		1200 SOUTH PINE ISLAND ROAD			~	
٠		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				
		PLANTATION, FL_	33324		HAR 6	
	(b)	Corporation Service Company			PHIZ: 09 SSEE. FL	
	` ′	Enter name of NEW Registered Agent and/or NEW Registered C	)ffice add	ress:	TA O	
		1201 Hays Street			- H 9	
		NEW Registered Office Address:				
		Tallahassee, FL_	32301			
the age	cha ent w s/we	mited liability company is not organized under the laws nge or changes are made, the Florida street address of table identical. Or, in the case of a Florida limited liab re authorized by an affirmative vote of the members of cles of organization or the operating agreement of the liab	he regist pility cor the limi	ered office npany, it is ted liability	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in	
<b>V</b>				Greenberg	Authorized Person Printed or typed name of signee	
II pro the to no.	nereb Nisie Obli mere tified	over of a member or authorized representative of a member by accept the appointment as registered agent and agree on so fall statutes relative to the proper and complete positions of my position as registered agent as provided by reflect a change in the registered office address, I have been sufficiently of this change.	erforma for in C ereby co	nce of my a hapter 605, nfirm that t	ncity. I further agree to comply with the duties, and I am familiar with and accept	
		, , , , , , , , , , , , , , , , , , ,	(227	7F 11 1	Et 23344	