

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000146714

Entity Name: MS PEO I, LLC**Current Principal Place of Business:**3350 BUSCHWOOD PARK DR
SUITE 200
TAMPA, FL 33618**Current Mailing Address:**135 W CENTRAL BLVD
SUITE 600
ORLANDO, FL 32801 US**FEI Number:** 47-4969116**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NATIONAL REGISTERED AGENTS, INC.
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:** ED HAND

04/04/2017

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name MASEDA, MIGUEL A
Address 3350 BUSCHWOOD PARK DR
SUITE 200
City-State-Zip: TAMPA FL 33618

Title MANAGER
Name CAHILL, DANIEL
Address 3350 BUSCHWOOD PARK DR
SUITE 200
City-State-Zip: TAMPA FL 33618

Title MANAGER
Name SACK, AARON
Address 3350 BUSCHWOOD PARK DR
SUITE 200
City-State-Zip: TAMPA FL 33618

Title MANAGER
Name SHAW, ADAM
Address 3350 BUSCHWOOD PARK DR
SUITE 200
City-State-Zip: TAMPA FL 33618

Title MANAGER
Name ROSO, ALEXANDER
Address 3350 BUSCHWOOD PARK DR
SUITE 200
City-State-Zip: TAMPA FL 33618

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MIGUEL A MASEDA

PRESIDENT/CEO

04/04/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date