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D. BRUCE

SEP 07 2010

EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJ	JECT:	NAIRN TRANSPORT LLC me of Limited Liability Company
	140	me of Enimed Elabinty Company
Dear	Sir or Madam:	
The e	nclosed Registered Agent/Regis	stered Office Change and fee(s) are submitted for filing.
Please	e return all correspondence con	cerning this matter to the following:
	Mohamad K. Ral	pata
	Name of Person	
	NAIRN TRANSPOR	TLLC
	Firm/Company	
	11542 Lake Willis Address	Drive AHAS
	Orlando, Fl 328	
	City/State and Zip Code	TATE DRIDA
E	nairntransport@ao	l.com il report notification)
For fu	orther information concerning th	is matter, please call:
	Mohamad K. Rabata	at (407) 238-0000
	Name of Person	Area Code & Daytime Telephone Number
	STREET/COURIER ADDRES	SS: MAILING ADDRESS:
	Registration Section	Registration Section
	Division of Corporations	Division of Corporations
	Clifton Building	P.O. Box 6327
	2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314
	Enclosed is a check for the fo	ollowing amount:
	\$25 Filing Fee	\$55 Filing Fee & Certified Copy

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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 608.416 or 608.508, 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. Name of the limited liability company:	NAIRN TRANSPORT LLC	_		
2. (a) Principal office address of limited liability compar	ny: 11542 Lake Willis Drive			
(Note: MUST BE STREET ADDRESS)				
	Orlando, Fl 32821			
(b) Mailing address of limited liability company:	11542 Lake Willis Drive			
(Note: MAY BE POST OFFICE BOX)				
	Orlando, Fl 32821	_		
01/05/2010	L1000005025			
3. Date of filing/registration in Florida	4. Document number			
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:				
Registered Agent:	Edna Rabata			
Registered Office Address:	11542 Lake Willis Drive	_		
	Orlando, Fl 32821	_		
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Agent</u> : NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Mohamad K. Rabata			
(MUST BE FLORIDA STREET ADDRESS)	>			
	Orlando ,FL 32821			
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. X Signature of a member or authorized representative of a member				
Mohamad K. Rabata				
Printed or typed name of signee				
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the plant I am familiar with and accept the obligations of my p Chapter 608, F.S. Or, if this document is being filed to maddress, I hereby confirm that the limited liability company	agree to act in this capacity. I further agree to oroper and complete performance of my duties, position as registered agent as provided for in nerely reflect a change in the registered office my has been notified in writing of this change.	0		

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