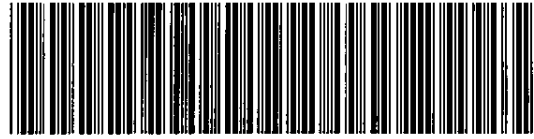


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01/07/11--01012--012 **25.00

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

J. SAULSBERRY
EXAMINER

JAN 10 2011

COVER LETTER

~~Sent 1/3/11~~

TO: Registration Section
Division of Corporations

SUBJECT: Nabular Enterprises
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Suzanne Pierannunzi
Name of Person

Nabular Enterprises
Firm/Company

4398 SE 53 Street
Address

Ocala, FL 34480
City/State and Zip Code

mpierannunzi@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Suzanne Pierannunzi at (352) 216-5019
Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

\$25 Filing Fee

\$55 Filing Fee & Certified Copy

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TALLAHASSEE, FLORIDA

2011-1-11-11

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: Nabular Enterprises

2. (a) Principal office address of limited liability company: _____

(Note: **MUST BE STREET ADDRESS**) 4398 SE 53 Street
Ocala, FL 34480

(b) Mailing address of limited liability company: _____

(Note: **MAY BE POST OFFICE BOX**) 4398 SE 53 Street
Ocala, FL 34480
L1 00 000 31752

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: Agents and Corporations

Registered Office Address: 1201 Orange Street, Ste. 600
Wilmington, DE
19899-0511

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Agent: Suzanne Pierannunzi

NEW Registered Office Address: 4398 SE 53 St.
~~Ocala, FL~~
Ocala, FL, FL 34480

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.

Suzanne King
Signature of a member or authorized representative of a member

Suzanne Pierannunzi
Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Suzanne King
Signature of Registered Agent

SECRET
JAN - 7 PM 3:50
TALLHASSEE, FLORIDA
SECRETARY OF STATE