

100000004526

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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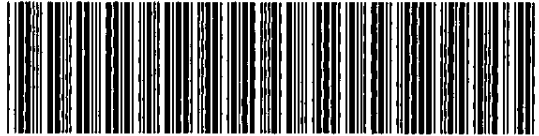
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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M. THOMAS

JAN 27 2009

EXAMINER

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** NORRIS NEW VENTURE, LLC  
(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:

HAREN NORRIS  
(Name of Person)

NORRIS NEW VENTURE, LLC  
(Firm/Company)

235 Apollo Beach Blvd. Suite #224  
(Address)

Apollo Beach, FL 33572  
(City/State and Zip Code)

For further information concerning this matter, please call:

HAREN NORRIS at ( 813 ) 227-3418  
(Name of Person) (Area Code & Daytime Telephone Number)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**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

**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: NORRIS NEW VENTURE, LLC
2. (a) Principal office address of limited liability company: 235 Apollo BEACH BLVD, SUITE #224  
(Note: **MUST BE STREET ADDRESS**) APOLLO BEACH, FL 33522
- (b) Mailing address of limited liability company: 235 Apollo BEACH BLVD, SUITE #224  
(Note: **MAY BE POST OFFICE BOX**) APOLLO BEACH, FL 33522

04/17/2000  
3. Date of filing/registration in Florida

L00000004526  
4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

KAREN NORRIS

Registered Office Address:

212-A APOLLO BEACH BLVD  
APOLLO BEACH, FL 33522

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

**NEW Registered Agent:**

**NEW Registered Office Address:**  
(**MUST BE FLORIDA STREET ADDRESS**)

235 APOLLO BEACH BLVD, SUITE #224  
APOLLO BEACH, FL 33522

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.

Karen M. Norris  
(Signature of a member or authorized representative of a member)

KAREN M. NORRIS  
(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.

(Signature of Registered Agent)

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

09 JAN 26 PM 12:00

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