- JAGBIR GREWAL NIRVANA L.C. 13847 WALSINGHAM RD., SUITE 118 - LARGO, FL 33774			
City/State/Zip	Phone #	Office Use Only	
CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):			
1. (Corporation	Name) (Doc	ument #)	
2. (Corporation Name)			
4. (Corporation Name) (Document #)			
□ Walk in □ Pic □ Mail out □ Wil	k up time Photocopy	☐ Certified Copy ☐ Certificate of Status	·
NEW FILINGS	AMENDMENTS		•
Profit	Amendment		밀
NonProfit	Resignation of R.A., Officer/ Direct	tor SFP	IVISE OF OF OF OF OF OF OF OF OF OF OF OF OF
Limited Liability	Change of Registered Agent	P 27	REAL PROPERTY OF THE PROPERTY
Domestication	Dissolution/Withdrawal	l l	
Other	Merger	PM 12: 13	F STAI
OTHER FILINGS Annual Report	REGISTRATION/	- 3	TIE TE
Fictitious Name	Foreign	- 4	
Name Reservation	Limited Partnership	4	
	Reinstatement		
	Trademark		
	Other		
CR2E031(1/95)		Examiner's Initials	



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

September 13, 2000

JAGBIR GREWAL NIRVANA L.C. 13847 WALSINGHAM RD., SUITE 118 LARGO, FL 33774

SUBJECT: NIRVANA L.C. Ref. Number: L00000007285

We have received your document for NIRVANA L.C., however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$25.00.

The "Statement of Change of Registered Agent or Registered Office" and the "Amendment" are two individual filings, with two filing fees. They are \$25.00 each, therefore, the \$25.00 received was used for the amendment, and now \$25.00 is due to change the Registered Agents address. Please send payment along with this application.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6967.

Michelle Hodges Document Specialist

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Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

Letter Number: 700A00048315

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. NIRVANA L.C. 1. The name of the limited liability company is: WALSINGHAM 2. The mailing address of the limited liability company is: 13847 STE 118, LARGO, FL 33774 6/16/00 . 00000007285 3. Date of filing/registration in Florida Document number 5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: GREWAL Name BAILEY 57 Address RATON, FL City, State and Zip 6. The name and address of the new registered agent and/or office: JAGBIR GREWAL Name 13847 WALSINGHAM RD, STE 118 Florida street address (P.O. Box NOT acceptable) City, State and Zip 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. member or authorized representative of a member) (Signature of a Jagbir GREWAL (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

INHS18(10/99)

FILING FEE: \$25.00