2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000018399

Entity Name: NOBLIN PARTNERS, L.L.C.

FILED Feb 16, 2009 Secretary of State

Current Principal Place of Business:

New Principal Place of Business:

1809 MICCOSUKEE COMMONS DR., UNIT 112 TALLAHASSEE, FL 32308

1809 MICCOSUKEE COMMONS DR., # 112

TALLAHASSEE, FL 32308

Current Mailing Address:

New Mailing Address:

1809 MICCOSUKEE COMMONS DR., UNIT 112 TALLAHASSEE, FL 32308

1809 MICCOSUKEE COMMONS DR., #112

TALLAHASSEE, FL 32308

FEI Number: 59-3751595

FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

NOBLIN, MILLARD J

NOBLIN, MILLARD J 1809 MICCOSUKEE COMMONS DR., #112

1809 MICCOSUKEE COMMONS DR., UNIT 112 TALLAHASSEE, FL 32308

TALLAHASSEE, FL 32308 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:

02/16/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

Address:

(X) Change () Addition

() Delete Name:

Title: Name: NOBLIN, MILLARD J

NOBLIN, MILLARD J Address: 1809 MICCOSUKEE COMMONS DR., UNIT 112

1809 MICCOSUKEE COMMONS DR., #112

City-St-Zip: TALLAHASSEE, FL 32308 City-St-Zip: TALLAHASSEE, FL 32308

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: MILLARD J. NOBLIN **MGRM** 02/16/2009