Nice & Easy Blinds & Shutters 40 Years of Window Covering Experience 701 Enterprise Rd., #805 Safety Harbor, FL 34695 (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies \_ Certificates of Status Special Instructions to Filing Officer:

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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. The name of the limited liability company is: Nice of	Easy Blinds & Shutters LLC.
2. The mailing address of the limited liability company is:	701 Enterprise Rd E, #805.
Safety Harbor, FL 34695	
8/05/03	L03000028657
3. Date of filing/registration in Florida	4. Document number
5. The name of the registered agent and the registered office Florida Department of State:  Legal Zoom Never Name	
Name  44 W. Flagler Str Address  Miani, Fl. 33.  City. State and A	reed, #675
6. The name and address of the new registered agent and/or	office:
Janes P. Jus Name 701 Enferprise Rd. Florida street address (P.O. Box	E #905 Mg T T NOT acceptable)
Safety Harbor, FL 3. City, State and Zi	p
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.	
Signalure of a member of authorized representative of a member)	
Janes P. Just JR (Printed or typed name of signee)	<del></del>
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 632	Z7, Tananassee, FL 52514

**FILING FEE: \$25.00** 

INHS18(10/99)