L03000048632

(Requestor's Name)			
(Address)			
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(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Decomposit Name Lea)			
(Document Number)			
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

M SEP 1 7 2009

COVER LETTER

TO:	Registration Section		
	Division of Corporations		
SUBJECT: NDB Associates LLC			
	Name of	Limited Liability Company	
Dear	Sir or Madam:	. •	
The e	nclosed Registered Agent/Registered	Office Change and fee(s) are submitted for filing.	
Please	e return all correspondence concerning	g this matter to the following:	
	•		
	Jerry J. Bandy		
	Name of Person		
	NDB Associates LLC		
	Firm/Company		
	, ,	,	
	10693 Wiles Road, #250		
-	Address		
	Coral Springs, FL 33076		
	City/State and Zip Code	<u> </u>	
	oily, but the cap cour		
	ierrvndb@msn.com		
E	jerryndb@msn.com -mail address: (to be used for future annual report	notification)	
For fu	urther information concerning this mat	tter, please call:	
	5		
	Jerry J. Bandy	at (954) 650-0458	
	Name of Person	Area Code & Daytime Telephone Number	
	STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section Registration Section			
	Division of Corporations	Division of Corporations	
	Clifton Building	P.O. Box 6327	
	2661 Executive Center Circle	Tallahassee, Florida 32314	
	Tallahassee, Florida 32301		
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.

Name of the limited liability company:	NDB Associates LLC
2. (a) Principal office address of limited liability company	y: NDB Associates LLC
(Note: MUST BE STREET ADDRESS)	6688 Malta Drive Boynton Beach, FL 33437
(b) Mailing address of limited liability company:	NDB Assoiates LLC
(Note: MAY BE POST OFFICE BOX)	10693 Wiles Road, #250 Coral Springs, FL 33076
12/01/03	L03000048632
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on	
Registered Agent:	Mike Dreiblatt \$3.00
Registered Office Address:	NDB Associates LLC 6688 Malta Drive Boynton Beach, FL 33437
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u>	W Registered Office address:
NEW Registered Agent:	Jerry J. Bandy
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	NDB Associates LLC 5353 NW 107 Avenue Coral Springs ,FL33076
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be ident liability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the operating agreement of the limited liability company. Signature of a member of authorized representative of a member Jerry J. Bandy Printed or typed name of signee I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the product of the provisions of all statutes relative to the product of the provisions of the obligations of my post chapter 608, F.S. Or, if this document is being filed to metaddress, I hereby confirm that the limited liability company. Signature of Registered Agent	lorida street address of the registered office ical. Or, in the case of a Florida limited was/were authorized by an affirmative vote wise provided in the articles of organization.
Division of Corporations, P.O. Box 63	27, Tallahassee, FL 32314

FILING FEE: \$25.00