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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: NA VENTURES, 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	g this matter to the following:	
Alina Silvers (Name of Person)		
NRAI Services, Inc (Firm/Company)		
2731 Executive Park Drive Suite	4	
Weston, Fl 33331		
(City/State and Zip Code)		
For further information concerning this matt	ter, please call:	
Alina Silvers	at (954) 318-2787	
(Name of Person)	(Area Code & Daytime Telephone Number)	
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	ng 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. The name of the limited liability company is: NA VENTURES, LLC			
2. The mailing address of the limited liability con			
Delray Beach, FL 33483			
50mg/ 200mg/ 200 to			
08/07/2006	L06000077795		
3. Date of filing/registration in Florida	4. Document number		
5. The name of the registered agent and the register Florida Department of State:	ered office address as shown on the records of the		
Michael G. Park, Esq.			
	Name # 55.		
1801 S Federal Hwy Ste	300 FR 1		
A	ddress		
Delray Beach, FL 33483			
City, S	tate and Zip		
1801 S Federal Hwy Ste 300 Address Delray Beach, FL 33483 City, State and Zip 6. The name and address of the new registered agent and/or office:			
NRAI Services, Inc.			
Name			
2731 Executive Park Drive, Suite 4			
Florida street address (P.O. Box NOT acceptable)			
Weston	FL 33331		
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 of the operating agreement of the limited liability company.			
(Signature of a member or authorized representative of a member			
Michael G. Park, MORRI AUTHORIZED REFRES. (Printed or typed name of signee)	INTATINE		
comply with the provisions of all statutes relative and I am familiar with and accept the obligations Chapter 608, F.S., Or, if this document is being find address, thereby confirm that the limited liability NRADSorvices. Inc.	ent and agree to act in this capacity. I further agree to to the proper and complete performance of my duties, of my position as registered agent as provided for in ed to merely reflect a change in the registered office company has been notified in writing of this change.		
(Signature of Registered Agent) Karen Redman, Asst. Sec.			
Division of Corporations, P.O.	. Box 6327, Tallahassee, FL 32314		

FILING FEE: \$25.00