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T. HAMPTON

JUN 1 0 2008

EXAMINER

COVER LETTER

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TO: Registration Section Division of Corporations	
SUBJECT: NIBLOCK & ASSOCIA (Name	TES, LLC e 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 concernin	g this matter to the following:
Glenn A. Niblock	
(Name of Person)	
Niblock & Associates, LLC (Firm/Company)	
2129 Antillies Dr.	
(Address)	
Pensacola, FL 32506	
(City/State and Zip Code)	
For further information concerning this ma	itter, please call:
Glenn A. Niblock	at (850) 455-8133
(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 follow	ing 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. Name of the limited liability company: NIBLOCK	& ASSOCIATES, LLC	6
2. (a) Principal office address of limited liability compa (Note: MUST BE STREET ADDRESS)	any: 2129 Antillies Dr. Pensacola, FL 32506	0 p
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	2129 Antillies Dr. Pensacola, FL 32506	
January 23, 2007	L07000008149	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown of	on the records of the Florida Dept. of	
Registered Agent:	Spiegel & Utrera	
Registered Office Address:	1840 Coral Way, 4th Floor Miami, FL 33145	Ð
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>N</u>	EW Registered Office address:	
NEW Registered Agent:	Glenn A. Niblock	Ð
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Niblock & Associates, LLC 2129 Antillies Dr. Pensacola,FL_32506	0
If the limited liability company is not organized under the that after the change or changes are made, the Florida stroffice of the registered agent will be identical. Or, in the hereby confirmed that the change(s) was/were authorized liability company or as otherwise provided in the articles limited liability company. See A. Wallock. (Signature of a member or authorized representative of a member)	ne laws of the State of Florida, it is hereby confirm reet address of the registered office and the busine e case of a Florida limited liability company, it is d by an affirmative vote of the members of the lin	ess nited
Glenn A. Niblock (Printed or typed name of signce) I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the am familiar with and accept the obligations of my positions. Or, if this document is being filed to merely reflect confirm that the limited liability company has been notifications of Registered Agent)	—— d agree to act in this capacity. I further agree to proper and complete performance of my duties, a on as registered agent as provided for in Chapter a change in the registered office address, I hereb fied in writing of this change.	nd I 608, y

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00