

DOCUMENT# L07000061229

Entity Name: GIACOMELLI-NASRA INTERIOR DESIGN, LLC

New Principal Place of Business:

Current Mailing Address:**New Mailing Address:**

FEI Number: _____ **FEI Number Applied For ()** _____ **FEI Number Not Applicable (X)** _____ **Certificate of Status Desired ()** _____

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date _____

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: NASRA, CLAUDIA E OWNER
Address: 6122 SOUTHARD STREET
City-St-Zip: WEST PALM BEACH, FL 33411 US

Title: MGR
Name: GIACOMELLI, DARIO CARLOS
Address: 148 OHIO RD
City-St-Zip: LAKE WORTH, FL 33467 US

I hereby 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: CLAUDIA NASRA

MGR

02/19/2010

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date