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(Re	equestor's Name)				
(Address)					
(Address)					
(Cit	ty/State/Zip/Phone	= #)			
PICK-UP	WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificates	of Status			
Special Instructions to Filing Officer:					

Office Use Only



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SEGNEDADE FLORIDA

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J. BRYAN

OCT -7 2010

EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations							
			_					
SUBJ	SUBJECT: Nemo's Bounty LLC Name of Limited Liability Company							
	Name of	Limited	Liabil	ity (Company			
Dear	Sir or Madam:							
The e	nclosed Registered Agent/Registered	Office (Change	and	fee(s) are submitted f	or filing.		
Please	e return all correspondence concernin	g this m	atter to	the	following:			
	Irene Chen Name of Person			_				
	Name of Person							
	Nemo's Bounty LLC							
	Firm/Company					三型線	5	
						SEURE ASSEE, FLORIDI TALLAHASSEE, FLORIDI	OCT -6 PM 4: 36	
	111 C. Ammania Ava Cuita	204					<u></u>	
	111 S. Armenia Ave. Suite	201				SS	တ်	[
	Address					in a	~0	[1]
						平息	===	_
	Tampa, FL 33609					9	-F	
	City/State and Zip Code			_			36	
	irene@transglobalproducts.	com						
E	irene@transglobalproductsmail address: (to be used for future annual report	notificatio	n)					
For fi	urther information concerning this ma	tter, plea	ise call	:				
	Irene Chen	at (813)	839-9060)		
	Name of Person	(Area	Code & Daytime Telephone	Number	_	
	CERTIFICATION APPROA				NO ADDDDOG			
	STREET/COURIER ADDRESS:				NG ADDRESS:			
	Registration Section				ation Section n of Corporations			
	Division of Corporations Clifton Building				n of Corporations ox 6327			
	2661 Executive Center Circle				ssee, Florida 32314			
	Tallahassee, Florida 32301		ı aı	iaiia	55cc, 1 1011da 52514			
	Enclosed is a check for the follow	ing ama	unt:					
		5 #1110				_		
	\$25 Filing Fee		\$5	55 F	iling Fee & Certified (Copy		

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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.

I. Name of the limited liability company:	Nemo's Bounty LLC			
2. (a) Principal office address of limited liability company	y: 111 S. Armenia Ave. Suite 201			
(Note: MUST BE STREET ADDRESS)	Tampa, FL 33609			
(b) Mailing address of limited liability company:	111 S. Armenia Ave. Suite 201			
(Note: MAY BE POST OFFICE BOX)	Tampa, FL 33609			
06/25/2007	L07000066727			
3. Date of filing/registration in Florida	4. Document number			
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:			
Registered Agent:	Irene Chen			
Registered Office Address:	3825 Henderson Blvd Suite 305 Tampa, FL, 33629			
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:				
NEW Registered Agent:	Irene Chen			
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	111 S. Armenia Ave. Suite 201			
***************************************	Tampa,FL33609			
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. Signature of a member or authorized representative of a member				
Irene Chen	_			
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 prand I am familiar with and accept the obligations of my pochapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability companions of Pocietard Apart.	agree to act in this capacity. I further agree to oper and complete performance of my duties, sition as registered agent as provided for in erely reflect a change in the registered office y has been notified in writing of this change.			

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