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PICK-UP	WAIT .	MAIL .
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Certified:Copies	· Certificates	of Status : 1
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Special Instructions to	Filing Officer:	,
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Office Use Only



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T. HAMPTON OCT 2 9 2009

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: NATIONWIDE COM	IMERCIAL CAPITAL, LLC	
Name of Limited	Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office O	Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
KATHLEEN TOMASSO Name of Person		
NATIONWIDE COMMERCIAL CAPITAL, I	<u>LC</u>	
4400 N. FEDERAL HIGHWAY, SUITE 12 Address	22	
BOCA RATON, FL 33431 City/State and Zip Code		
E-mail address: (to be used for future annual report notification	on)	
For further information concerning this matter, please call:		
KATHLEEN TOMASSOat (561) 347-2228	
Name of Person	Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations Clifton Building	Division of Corporations 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.

1. Name of the limited liability company: _NATIONW	IDE COMMERCIAL CAPITAL, LLC
2. (a) Principal office address of limited liability company	1301 N. Congress Ave. Ste 350
(Note: MUST BE STREET ADDRESS)	Boynton Beach, Fl 33426
(b) Mailing address of limited liability company:	1301 N. Congress Ave. Ste 350
(Note: MAY BE POST OFFICE BOX)	Boynton Beach, FL 33426
October 18, 2007	LO7000105712
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:	ANTHONY TOMASI, JR
Registered Office Address:	4400 N. FEDERAL HWY. STE 122 BOCA RATON, FL. 33431
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent</u>	
NEW Registered Agent:	ROBERT E. GOLD
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1301 N. CONGRESS AVE. STE 350
	BOYNTON BEACH ,FL 33426
If the limited liability company is not organized under the longer confirmed that after the change or changes are made, the Fl 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 or authorized representative of a member **EATHLEEN TOMASSO** Printed or typed name of signee**	lorida street address of the registered effice ical. Or, in the case of a Florid dimited was/were authorized by an affifinative vote wise provided in the articles of regardation
I hereby accept the appointment as registered agent and a comply with the provisions of all stanties relative to the provisions of all stanties relative to the provision of all stanties relative to the provision of land and I am familiar with and accept the obligations of my post Chapter 608 F. Or if this accument is being filed to me address, I hereby confirm that the limited liability company Signature of registeral Agent Division of Corporations, P.O. Box 63.	oper and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office has been notified in writing of this change.
· Division of Corporations, 1 .O. DOX 03.	6/1

FILING FEE: \$25.00