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SECRETARY OF STATE DIVISION OF CORPORATION

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January 19, 2011

FL Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: 1058 Nash Drive LLC

Dear Sir or Madam.

Enclosed are executed duplicate Statement of Change of Registered Office of Registered Agent of Both for the above-referenced entity. I have attached a check (#2099) for \$25 payable to the Florida Division of Corporations to cover the filing fees.

Once filed, kindly send to my attention via regular mail a plain copy of the filed evidence to my attention at the address listed on this letterhead.

Should you have any questions, feel free to call or email me at tmackay@nationalcorp.com.

With all good wishes,

Tony Mackay ∪ Branch Manager

E-MAIL: INFO@NATIONALCORP.COM WEB SITE: WWW.NATIONALCORP.COM

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.

agoin, or com, in the state of 1 to the				
Name of the limited liability company:	1058 NASH DRIVE LL	1058 NASH DRIVE LLC		
2. (a) Principal office address of limited liability compa	y: 9408 GULFSTREAM RD			
(Note: MUST BE STREET ADDRESS)		1 DIVIS		
	FRANKFORT, IL 60423			
(b) Mailing address of limited liability company:	9408 GULFSTREA	M RD		
(Note: MAY BE POST OFFICE BOX)		25		
	FRANKFORT, IL 60423	3		
04/03/2008	L0800003390)4		
3. Date of filing/registration in Florida	4. Document number	<u>ပ</u> ာ္		
5. (a) Registered Agent and Registered Office shown of	on the records of the Florida Dep	ot. of State:		
Registered Agent:	CT CORPORATION SYS	STEM		
Registered Office Address:	1200 SOUTH PINE ISLAND ROAD			
	PLANTATION FL	33324		
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>N</u>	EW Registered Office address	j:		
NEW Registered Agent:	National Corporate Research, Ltd., Inc.			
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	515 East Park Avenue			
	Tallahassee	,FL <u>32301</u>		
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be idliability company, it is hereby confirmed that the change of the members of the limited liability company or as of or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member	e Florida street address of the reg entical. Or, in the case of a Flor e(s) was/were authorized by an a herwise provided in the articles of	is hereby sistered office ida limited ffirmative vote of organization		
Richard W. Richardson, President of Richardson Printed or typed name of signee Ventures GP, Inc. Man.				
I hereby accept the appointment as registered agent an comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of my Chapter 608, F.S. Or, if this document is being filed to address, I hereby confirm that the limited liability comp	_	further agree to ce of my duties, provided for in gistered office of this change.		
Signature of Registered Agent / WCR				

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