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SIVISION OF CORPORATIONS

B. KOHR 0CT 3 0 2009

EXAMINER

COVER LETTER

TO:

Registration Section

Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

Division of Co	rporations				
SUBJECT:					

The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.			
Please return all corresp	ondence concerning this matter	to the following:		OPOCT 28 AHO: OF	
	CI	HARLES E. NEWMAN		1 28 1 28	
		Name of Person		# OR S	
	NB PROPERTIES I, LLC				
			F 50		
	707 E. COLONIAL DRIVE				
		Address			
	C	RLANDO, FL 32803		•	
		City/State and Zip Code			
	NEV E-mail address: (1	VMANCPA@AOL.COM to be used for future annual report notificed to the control of t	cation)		
For further information	concerning this matter, please c	all:			
CHARI	LES E. NEWMAN	at (407)	228-0700		
Name	of Person	Area Code & Daytime	Telephone Number		
Enclosed is a check for	the following amount:				
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &	
	ING ADDRESS: ration Section	STREET/COURIER ADDRESS: Registration Section			

Division of Corporations

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



NB PROPERTIES I, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Com	npany were filed on	APRIL 9, 2008	and assigned	
Florida document number L08000035817				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited	d liability company he	ere:		
The new name must be distinguishable and end with the words "L.L.C."	"Limited Liability Comp	pany," the designation "LL	C' or the abbreviation	
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRES	<u> </u>			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		our records, enter the	e name of the new	
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street address			
	, Florida			
	City		Zip Code	

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member **Type of Action** Title Name 1 Address MGRM MOHAN J. BHOOLA ☐ Add
✓ Remove **45 SETON TRAIL** ORMOND BEACH, FL 32176 MOHAN KANJEE MGRM **45 SETON TRAIL** ✓ Add ORMOND BEACH, FL 32176 Remove ☐ Add _ Remove ☐ Add Remove Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 2009

CHARLES E. NEWMAN

Signature of a member or authorized representative of a member

Typed or printed name of signce

Page 2 of 2

Filing Fee: \$25.00