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B. KOHR

OCT 1 9 2010

**EXAMINER** 

SECRETARY OF STATE

J.VISION OF CORPORATION

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: NOBO GROW, LLC Name of Limited Liability Company	100 States
The enclosed Articles of Amendment and fee(s) are submitted for filing.	10 OCT 15
Please return all correspondence concerning this matter to the following:	
Rosulta John Son	<u>、</u>
Moso Comment, Firm/Company	LLC
1804 N. Cixic Hung	Suite A
City/State and Zip Code  rjohn 3m @ i value net  J-mail address: (to be used for future annual report no	33407
For further information concerning this matter, please call:	
Rosita John San at (56) 370.  Name of Person Area Code & Days	3617 time Telephone Number
Enclosed is a check for the following amount:	
\$25.00 Filing Fee Certificate of Status  Certificate of Status  Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

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

NOBO	General LAC 15 Const
(Name of the Limited Liab	ility Company as it now appears on our records.) ida Limited Liability Company)
The Articles of Organization for this Limited Liabilit	ility Company as it now appears on our records.) ida Limited Liability Company)  ty Company were filed on May 28, 2010 and assigned  7
This amendment is submitted to amend the following	g:
A. If amending name, enter the new name of the	limited liability company here:
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET AL	DDRESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	2
B. If amending the registered agent and/or re registered agent and/or the new registered office a	egistered office address on our records, enter the name of the new
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
<del></del>	, Florida

## 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 Changing Registered Agent, Signature of New Registered Agent

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

<u>Title</u> <u>Address</u> **Type of Action** <u>Name</u> MGRM JOSEPH C. VISCONM ☐ Add Remove ☐ Add ☐ Remove Add Remove  $\square$ Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Kosubra John Zon
Signature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00