L11000034646

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
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Office Use Only



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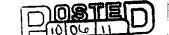
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11 NOV -7 FIT 3: LL SEUNLESSEE FLORIDA

B. BOSTICK
NOV 8 - 2011
EXAMINER

COVER LETTER

10.	Division of Corporations						
SUB.	JECT:	Noble E	arth Real	ty, LLC			
		Name of Limite					
Dear	Sir or Madam:						
The e	nclosed Registered Agent/Re	gistered Office	Change and	fee(s) are submitted for f	filing.		
Please	e return all correspondence co	oncerning this n	natter to the	following:			
	Dana Munach, Name of Person	MGRM					
	Noble Earth Rea Firm/Company	lty, LLC					
	1806 N Flamingo Roa Address	d, Suite 410					
	Pembroke Pines, I City/State and Zip C				TALLA	=	الماران
E	jlouis@amgorg	I.com nual report notificati	on)	•		1	, e ve
For fu	orther information concerning	this matter, ple	ease call:		C FLOR	11 NOV -7 PH 3: 4	
	Jonathan Louis	at (954)	458-5557 x 224	IDA AUDA		
	Name of Person	~~ (_		Code & Daytime Telephone Num			
	STREET/COURIER ADDR Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	ESS:	Registra Division P.O. Box	NG ADDRESS: tion Section of Corporations x 6327 see, Florida 32314			
	Enclosed is a check for the	e following am	ount:				
	\$25 Filing Fee	_	\$55 Fi	ling Fee & Certified Copy	y		



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.

Name of the limited liability company:	Noble Earth Realty, LLC
2. (a) Principal office address of limited liability compa	iny: 1806 N Flamingo Road, Suite 410
(<u>Note: MUST BE STREET ADDRESS</u>)	Pembroke Pines, FL 33028
(b) Mailing address of limited liability company:	
(Note: MAY BE POST OFFICE BOX)	
03/22/2011	L11000034646
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown o	n the records of the Florida Dept. of State:
Registered Agent:	BUSINESS FILINGS INCORPORATED
Registered Office Address:	1203 GOVERNOR'S SQUARE BLVD Suite 101 TALLAHASSEE FL 32301-2960
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NI</u> <u>NEW</u> Registered Agent: <u>NEW</u> Registered Office Address:	Dana Munach 1806 North Flamingo Road
(MUST BE FLORIDA STREET ADDRESS)	Suite 435 Pembroke Pines ,FL 33028
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 ideliability company, it is hereby confirmed that the change of the members of the limited liability company or as other the operating agreement of the limited liability company.	Florida street address of the registered office ntical. Or, in the case of a Florida limited (s) was/were authorized by an affirmative vote
By: Mb R Signature of a member or authorized representative of a member	<u>v</u> n ==
Dana Munach, MGRM	LAHAS TELEVISION OF THE PROPERTY OF THE PROPER
Printed or typed name of signee	
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the p and I am familiar with and accept the obligations of my p Chapter 608, F.S. Or, if this document is being filed to maddress, thereby confirm that the limited liability compa	agree to act in this capacity. I further agree to proper and complete performance of my duties, position as registered agent as provided for inserely reflect a change in the registered office my has been notified in writing of this change.
Signature of Registered Agent)A

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