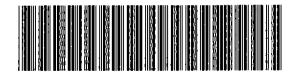
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ELIS WY OLAON LI

CORPDIRECT-AGENTS, INC. (formerly CCRS) 515 EAST PARK AVENUE TALLAHASSEE, FL 32301 222-1173 FILING COVER SHEET ACCT. #FCA-14 CONTACT: KATIE WONSCH DATE: 11/10/2011 **REF. #:** 000427.157085 CORP. NAME: NOBLE NET LEASE HIB, LLC () ARTICLES OF INCORPORATION (XX) ARTICLES OF AMENDMENT () ARTICLES OF DISSOLUTION () FICTITIOUS NAME () TRADEMARK/SERVICE MARK () ANNUAL REPORT () FOREIGN QUALIFICATION () LIMITED PARTNERSHIP () LIMITED LIABILITY () WITHDRAWAL () REINSTATEMENT () MERGER () CERTIFICATE OF CANCELLATION () OTHER: STATE FEES PREPAID WITH CHECK# 542196 FOR \$ 25.00 **AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:** COST LIMIT: \$____ PLEASE RETURN: (XX) PLAIN STAMPED COPY () CERTIFIED COPY () CERTIFICATE OF GOOD STANDING

Examiner's Initials

() CERTIFICATE OF STATUS

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



	Noble Net I	Lease IIIB, LLC			
(Na	me of the Limited Liability Cor (A Florida Limit	npany as it now appeated Liability Company)	rs on our records.		
The Articles of Organization f	or this Limited Liability Comp	oany were filed on	June 8, 2011	and assigned	
Florida document number	L11000067030				
This amendment is submitted	to amend the following:				
A. If amending name, enter	the new name of the limited	liability company he	re:		
The new name must be distingui	shable and end with the words "l	Limited Liability Comp	any," the designation "L	LC" or the abbreviation	
Enter new principal offices a	ddress, if applicable:				
(Principal office address MU.	ST BE A STREET ADDRESS	<u> </u>			
Enter new mailing address, i	f applicable:				
(Mailing address MAY BE A	POST OFFICE BOX)				
R If amonding the registe	ered agent and/or registered		our records apter th	be name of the new	
	new registered office address		our records, enter ti	ie name of the new	
Name of New Regist	ered Agent:		· · · · · · · · · · · · · · · · · · ·		
New Registered Offi	ce Address:	E)	nter Florida street addr	ess	
		. 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 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

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<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Traci L. Ambrosino	5821 C Lake Worth Rd. Greenacres, EL 33463	Add Remove
MGR	Paul Forberger	5821 C Lake Worth Rd. Greenacres, FL 33463	Add ☑ Remove
<u>MGRM</u>	Noble Net Lease III, LLC	5821 C Lake Worth Rd. Greenacres, FL 33463	
			Add Remove
			Add Remove
			Add Remove
D. If amend	ling any other information, enter cha	ange(s) here: (Attach additional sheets, if necessary.)	_
			-
Dated	11 . 10	2011	_
	- Anach	ther or authorized representative of a member	
	/	Traci L. Ambrosino	
	Туг	ped or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00