## L11000079942

(Requestor's Name)			
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(City/State/Zip/Phone #)			
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(Pusiness Entity Mama)			
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## **COVER LETTER**

TO:	Registration Section Division of Corporations	
SUBJ	ECT:	Nomega LLC
	Name o	f Limited Liability Company
Dear S	Sir or Madam:	
The e	nclosed Registered Agent/Registered	Office Change and fee(s) are submitted for filing.
Please	e return all correspondence concerning	ng this matter to the following:
	Larry Geimer CPA	
	Name of Person	
	Firm/Company	
	1990 Mian Street Suite 8	01
	Address	
	Sarasota, Florida 34236 City/State and Zip Code	<u> </u>
	, ,	
——————————————————————————————————————	Igeimer@kbgrp.com mail address: (to be used for future annual repor	t notification)
For fu	rther information concerning this ma	atter, please call:
	Larry Geimer	at ( 941 ) 365-4617
	Name of Person	Area Code & Daytime Telephone Number
	STREET/COURIER ADDRESS:	MAILING ADDRESS:
	Registration Section	Registration Section
	Division of Corporations	Division of Corporations
	Clifton Building	P.O. Box 6327
	2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314
	Enclosed is a check for the follow	ing amount:
	\$25 Filing Fee	\$55 Filing Fee & Certified Copy

## 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:	Nomega LLC			
2. (a) Principal office address of limited liability company	1990 Main Street Suite 801			
(Note: MUST BE STREET ADDRESS)	Sarasota, Florida 24226			
(b) Mailing address of limited liability company:	FAHADA			
(Note: MAY BE POST OFFICE BOX)	Me TO			
July 11,2011	L110000799437			
3. Date of filing/registration in Florida	4. Document number			
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:				
Registered Agent:	Gregory S Band			
Registered Office Address:	One South School Avenue Suite 500			
	Sarasota, Florida 34237			
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent</u> :	V Registered Office address:  Larry Geimer			
NEW Registered Office Address:	1990 Main Street			
(MUST BE FLORIDA STREET ADDRESS)	Suite 801 Sarasota ,FL 34236			
If the limited liability company is not organized under the legislation of the limited that after the change or changes are made, the Fl and the business office of the registered agent will be identifiability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the operating agreement of the limited liability company	aws of the State of Florida, it is hereby orida street address of the registered office cal. Or, in the case of a Florida limited was/were authorized by an affirmative vote wise provided in the articles of organization.			
Larry Geimer CPA				
Printed or typed name of signee	-			
I hereby accept the appointment as registered agent and an comply with the provisions of all statutes relative to the provisions of all statutes relative to the provision and I am familiar with and accept the obligations of my post Chapter 608, F.S. Or, if this document is being filed to mer address, I hereby confirm that the limited liability company	gree to act in this capacity. I further agree to per and complete performance of my duties, ition as registered agent as provided for in ely reflect a change in the registered office has been notified in writing of this change.			
Signature of Resistered Agent				

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