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(Requestor's Name)						
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Certified Copies	Certificates	s of Status				
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Special Instructions to	Filing Officer:					

Office Use Only



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NOV 03 2014 T. CARTER

LLC RAIRO change

COVER LETTER

TO:	Registration Section Division of Corporations					
SUBJE	NBR INVESTMENTS LLC					
		ne of Limited I	Liability Company			
Dear S	ir or Madam:					
The en	closed Registered Agent/Registered Of	fice Change an	d fee(s) are submitted for filing.			
Please	return all correspondence concerning the	nis matter to the	e following:			
Danie	el Gitlin					
	Name of Person		·			
	Firm/Company					
010 N	Firm/Company JE 20th Ave					
	Address					
Fort L	auderdale Fl 33304					
	City/State and Zip Code					
adnin	vest1@gmail.com					
E	E-mail address: (to be used for future an	nual report not	ification)			
For fur	ther information concerning this matter	, please call:				
Danie	el Gitlin	954 at (465-3753			
	Name of Person	,	Area Code & Daytime Telephone Number			
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	R D D	egistration Section bivision of Corporations O. Box 6327 allahassee, Florida 32314			
Enclosed is a check for the following amount:						
	S \$25 Filing Fee		855 Filing Fee & Certified Copy			
INHS18	8 (2/14)					

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.

1. Na	ame of the limited liability company: NBR INVEST	MENT	SLLC			
2. (a)	7 BONEI HA IR ST, APT 8	((b) 910 NW 20th AVE			
_, (,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	`	· · · · · · · · · · · · · · · · · · ·	Mailing address of limited (Note: MAY BE POS		
	TEL-AVIV , ISRAEL		Fort La	auderdale Fl 33304		
	69373	_				
	06/26/2013		L13000	092630		
3.	Date of filing/registration in Florida	4.		Document number		
5. (a)	INCORP SERVICES, INC					
J. (a)	Registered Agent and Registered Office shown on the records of	the Floric	la Dept. of St	tate:		
	Registered Office Address (MUST BE FLORIDA STREET A	ADDRES	<u>:S)</u>	_		
	LOXAHATCHEE	33470)			
(b)	DANIEL GITLIN Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office a	ddress:		OCT 21 PM	FILED PRETARY OF ARASSEE.
	NEW Registered Office Address:				င္မာ	F.S.
	910 NE 20th AVE		.		: 52	DRID,
	FORT LAUDERDALE , FL	33304	ŀ			
the cha agent v was/we the arti	imited liability company is not organized under the layinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lies authorized by an affirmative vote of the members of cles of organization or the operating agreement of the ture of a member or authorized representative of a member by accept the appointment as registered agent and agricultures of all statutes relative to the proper and complete ingutions of my position as registered agent as providedly reflect a change in the registered office address, I	the regability of the linited	istered officompany, in mited liability co	ice and the business of t is hereby confirmed to lity company or as other company. Your Printed or typed name compacity. I further agree	fice of the hat the cherwise pro	e registered ange(s) ovided in
nougied	I in writing of this change.	eretry	onga m an	named napmly (ompuny i	ing oven