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COVER LETTER

INHS18 (2/14)

TO:	Registration Section Division of Corporations			
SUBJF	NOLAN ENTERPRISES G	ROUP LLC	7	30
.,		£66		
Dear Si	r or Madam:			
The end	closed Registered Agent/Register	ed Office Change and f	ee(s) are submitted for filing.	20 (60 111 1211 28
Please	return all correspondence concert	ning this matter to the fo	ollowing:	28
NICOL	E NOLAN			
	Name of Persor	1	_	
NOLAN	NENTERPRISES GROUP LLC			
	Firm/Company		_	
225 CC	DLLINS AVE UNIT 3J			
	Address		_	
MIAMI	BEACH FL 33139			
	City/State and Zip (Code	_	
NICOL	E@NOLAN-ENTERPRISES.CO	М		
Е	-mail address: (to be used for futi	ure annual report notific	eation)	
For fur	ther information concerning this	matter, please call:		
NICOL	E NOLAN	305 at (942-0374	
	Name of Person		Area Code & Daytime Telephone Number	
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	
	Enclosed is a check for the following	lowing amount:		
	■ \$25 Filing Fee	□ \$5	5 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 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.

I. Na	une of the limited liability company: NOLAN ENERF	PRISES GRO	DUP LLC		
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) 225 COLLINS AVE UNIT 3J		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) 25 COLLINS AVE UNIT 3J		
	MIAMI BEACH FL 33139		MIAMI BEACH FL 33139		
	04/01/2016	L1	6000069807		
3. 5. (a)	Date of filing/registration in Florida A RESOLVER DOCUMENTOS LLC	4.	Document number		
	Registered Agent and Registered Office shown on the records of 1390 SOUTH DIXIE HIGHWAY	the Florida De	ppt, of State:		
	Registered Office Address (MUST BE FLORIDA STREET) 1310				
	CORAL GABLES	33146	146 20 .		
	NICOLE NOLAN	20 FEB 14 AM 11: 28			
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	<u></u>			
	225 COLLINS AVE				
	NEW Registered Office Address: UNIT 3J		ිත ´		
	MIAMI BEACH	33139			
change ngent v was/we he arti Signa	imited liability company is not organized under the later conchanges are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited litere 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 agreement of all statutes relative to the proper and complete	e registered of ability compositive compositive limited liab NICOL Tree to act in	office and the business office of the registered pany, it is hereby confirmed that the change(s) d liability company or as otherwise provided in vility company. E NOLAN Printed or typed name of signce this canacity. I further caree to comply with the		
the obl to mere notified	ons of all statutes relative to the proper and complete igutions of my position as registered agent as provide ely reflect a change in the registered office address, I fin writing of this change.	d for in Cha hereby confi	pter 605, F.S. Or, if this document is being filed rm that the limited liability company has been		