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B. BOSTICK
JUL 2 3 2013
EXAMINED



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Evelyn Wright

Date: July 17, 2013

Order#: 714327-347

Re: NF SUWANNEE, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Evelyn Wright

c/o Corporation Service Company
2711 Centerville Road, Suite 400

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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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.

1. Name of the limited liability company: NF SUWAN	INEE, LLC	
2. (a) Principal office address of limited liability com (<i>Note: MUST BE STREET ADDRESS</i>)	pany: 1620 SE. Helvenston S Live Oak, FL 32064	treet Southeast
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	2 North Palafox Street Pensacola, FL 32502	
06/09/2008	M08000002723	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown	on the records of the Florid	da Dept. of State:
Registered Agent:	Capitol Corporate Servi	
Registered Office Address:	155 Office Plaza Dr., St Tallahassee, FL 32301	uite A
(b) Enter name of NEW Registered Agent and/or	NEW Registered Office as	ddress:
<u>NEW</u> Registered Agent:	Corporation Service Co	ompany.
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1201 Hays Street	
	Tallahassee	,FL <u>32301</u>
If the limited liability company is not organized under confirmed that after the change or changes are made, t and the business office of the registered agent will be i liability company, it is hereby confirmed that the chanthe members of the limited liability company or as oth the operating agreement of the limited liability company. Signature of a member or authorized representative of a member	he Florida street address of identical. Or, in the case of ge(s) was/were authorized berwise provided in the article	the registered office a Florida limited by an affirmative vote of
Dona Priebe, Authorized Person Printed or typed name of signee	·	
I hereby accept the appointment as registered agent a comply with the provisions of all statules relative to the and I am familiar with and accept the obligations of m Chapter 608, F.S. Or, if this document is being filed to address, I hereby confirm that the limited liability con Corporation Service Company	ind agree to act in this capa ne proper and complete perf ny position as registered age o merely reflect a change in npany has been notified in w	city. I further agree to ormance of my duties, ent as provided for in the registered office writing of this change.

Signature of Registered Agent Elizabeth A. Dawson, Asst. Vice President

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