7NN/YY

(Requestor's Name)									
(Address)									
(Address)									
(City/State/Zip/Phone #)									
PICK-UP	☐ WAIT	MAIL							
(Business Entity Name)									
(Document Number)									
Certified Copies	Certificates	s of Status							
Special Instructions to Filing Officer:									

Office Use Only



300263258833

09/29/14--01030--001 **25.00

RA/RO/Ch8 70,10.8.14



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Lindsey Lockard llockar2@cscinfo.com

Date: September 25, 2014

Order#: 304795-005

Re: GLOBAL NEST LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

<u>XX</u> File in your office on a routine basis.

XX ___ Issue Proof of Filing.

<u>XX</u> Please return evidence to the following:

Attn: Lindsey Lockard

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.

OUCA.XCOA

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	me of the limited liability company: GLOBAL NEST	LLC					
2.	(a)	a) 281 ROUTE 79, SUITE # 208)				
	()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
		MORGANVILLE N. 07751	_			·		
		10/30/2008		M080000	04805			
3.		Date of filing/registration in Florida	4.		Document number			
5.	(a)	NRAI SERVICES, INC.						
	• /	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:						
		1200 SOUTH PINE ISLAND ROAD						
		Registered Office Address (MUST BE FLORIDA STREET A	DDRESS)	•			
						14	Śω	
		Plantation, FL_	33324			SEP 2	등 동편 요리~~	
						29		
	(b)	Corporation Service Company Enter name of NEW Registered Agent and/or NEW Registered (Office add	lress:	•	Ŧ.		
		The state of the s	Once auc	11 030.		æ	5. <u>7.</u>	
		1201 Hays Street				وتن	Ęm	
		NEW Registered Office Address:						
					•			
		Tallahassee, FL_	32301					
the ag wa the	e cha ent w is/we arti	mited liability company is not organized under the law nge or changes are made, the Florida street address of a vill be identical. Or, in the case of a Florida limited liable authorized by an affirmative vote of the members of cles of organization or the operating agreement of the l	the regis bility co f the lim limited li	tered office mpany, it is ited liability iability com	and the business office shereby confirmed that to y company or as otherwing apany. uthorized Person	of the the cha se pro	registered inge(s)	
	Signat				Printed or typed name of sig			
pro the to	ovisie e obli mere	y accept the appointment as registered agent and agreens of all statutes relative to the proper and complete pations of my position as registered agent as provided by reflect a change in the registered office address, I had in writing of this change.	ee to act performa I for in C ereby co	in this cape ance of my c Chapter 605 onfirm that i	acity. I further agree to duties, and I am familiar , F.S. Or, if this docume the limited liability comp	compl with a ent is b pany h	y with the and accept leing filed as been	
Si	Pnativ	re of Registered Agent Corporation Service Company	DV: C	rnco E V:-	hy Aggistant Vice De-	nida4		
-51	Piraini	Corporation Service Company	DI:U	race E. Kir	by, Assistant Vice Pre	sideni		

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