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Special Instruction	ns to F		Officer:		

Office Use Only



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SECRETARY DESTATE

C. LEWIS

MAY - 9 2011

EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations				
SUBJ		set Manage			
	Name o	of Limite	d Liability Cor	mpany	
Dear S	Sir or Madam:				
The en	nclosed Registered Agent/Registered	d Office	Change and fe	e(s) are submitted for filing.	
Please	return all correspondence concerni	ng this m	atter to the fol	llowing:	
	Ann Dagas				
	Ann Rogers Name of Person				
	range of Telson				
	National Asset Managers, Firm/Company	LLC			
	1 macompany				
	13800 Park Blvd.				
	Address				
	Seminole, FL 33776				
***************************************	City/State and Zip Code				
	,				
	ann@annragara aam				
E-mail address: (to be used for future annual report notification)					
	rther information concerning this m				
	Ann Rogers	at (_	727)	458-7660	
	Name of Person		Area Cod	le & Daytime Telephone Number	
	STREET/COURIER ADDRESS:		MAILING	ADDECC.	
	STREET/COURIER ADDRESS: Registration Section MAILING ADDRESS: Registration Section				
	Division of Corporations			Corporations	
	Clifton Building		P.O. Box 63		
	2661 Executive Center Circle			, Florida 32314	
	Tallahassee, Florida 32301			,	
	Enclosed is a check for the follow	ving amo	unt:	·	
[\$25 Filing Fee		S55 Filin	g 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.

1. Name of the limited liability company:	National Asset Managers, LLC
2. (a) Principal office address of limited liability c	ompany: 13800 Park Blvd.
(Note: MUST BE STREET ADDRESS)	Seminole, FL 33776
(b) Mailing address of limited liability company	13800 Park Blvd.
(Note: MAY BE POST OFFICE BOX)	Seminole, FL 33776
11/02/2009	M0900004314
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office sho	own on the records of the Florida Den 40f Side:
Registered Agent:	Ann Rogers PG
Registered Office Address:	70 Beach Drive NE
•	m B
(b) Enter name of <u>NEW Registered Agent</u> and	or NEW Registered Office address:
NEW Registered Agent:	
NEW Registered Office Address:	
<u>(MUST BE FLORIDA STREET ADDRES</u>	S) 13800 Park Blvd. Seminole ,FL33776
If the limited liability company is not organized und confirmed that after the change or changes are made and the business office of the registered agent will be liability company, it is hereby confirmed that the choof the members of the limited liability company or a or the operating agreement of the limited liability company or so the operating agreement of the limited liability company or a signature of a member or authorized representative of a member	e, the Florida street address of the registered office be identical. Or, in the case of a Florida limited ange(s) was/were authorized by an affirmative vote
Ann Rogers Printed or typed name of signee	
I hereby accept the appointment as registered agen comply with the provisions of all statutes relative to and I am familiar with and accept the obligations of Chapter 608, F.S. Or, if this document is being filed address, I hereby confirm that the limited liability constitution of Registered Agent	t and agree to act in this capacity. I further agree to the proper and complete performance of my duties, f my position as registered agent as provided for in d to merely reflect a change in the registered office ompany has been notified in writing of this change.

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