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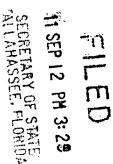
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J. BRYAN

SEP 1 3 2011

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
	d Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office	Change and fee(s) are submitted for filing.
Please return all correspondence concerning this m	natter to the following:
Alex Kurkin	
Name of Person	SECO S
Kurkin Forehand Brandes LLP Firm/Company	SEP 12 PM 3: 29 CRETARY OF STATE LAHASSEE, FLORIC
18851 N.E. 29th Avenue, Suite 303 Address	H 3: 28 FLORIDA
Aventura, FL 33180-2808 City/State and Zip Code	<u> </u>
akurkin@kfb-law.com E-mail address: (to be used for future annual report notification)	on) .
For further information concerning this matter, ple	ase call:
Angela Wylie at (at (850) 391-5060 Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amo	ount:
\$25 Filing Fee	\$55 Filing Fee & Certified Copy

Jun 75

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.

Name of the limited liability company:Na	oleton's Tallahassee Imports, LLC
2. (a) Principal office address of limited liability comp	oany: One East Oak Hill Drive, Suite 100
(Note: MUST BE STREET ADDRESS)	Westmont, IL 60559
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
06/15/2011	M11000003039
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown	on the records of the Florida Dept. of State.
Registered Agent:	Les Stracher
Registered Office Address:	18851 N. E. 29th Avenue, Suite 303 Aventura, FL 33180-2808
(b) Enter name of NEW Registered Agent and/or NEW Registered Agent	
NEW Registered Agent:	Alex Kurkin
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	<u>N/A</u>
Mess BB I Benne 131 BB I TESS)	,FL
If the limited liability company is not organized under to confirmed that after the change or changes are made, the and the business office of the registered agent will be id liability company, it is hereby confirmed that the change of the members of the limited liability company or as of or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member	e Florida street address of the registered office entical. Or, in the case of a Florida limited e(s) was/were authorized by an affirmative vote herwise provided in the articles of organization
Printed or typed name of signee	
I hereby accept the appointment as registered agent an comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of my Chapter 608, F.S. Or, if this document is being filed to address, I hereby confirm that the limited liability comp	d agree to act in this capacity. I further agree to proper and complete performance of my duties, position as registered agent as provided for in merely reflect a change in the registered office any has been notified in writing of this change

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