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COVER LETTER

Division of Corporations		
SUBJECT: NBG Developme Name of Foreign	Limited Liability C	Company
Dear Sir or Madam:		
The enclosed application, certificate and fee(s) as	e submitted for fili	ng.
Please return all correspondence concerning this	matter to the follow	ving:
Name of Person		
NBG Development LLC Firm/Company		
3549 Mendrer Blud Address		
Johnstown PA 15905 City/State and Zip Code		
E-mail address: (to be used for future annual re	eport notification)	
For further information concerning this matter, p	lease call:	
Nick Bronett	at (<u>814</u>) <u>2</u>	55-6099
Name of Person		aytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Ro D P.	AILING ADDRESS: egistration Section ivision of Corporations O. Box 6327 allahassee, Florida 32314
Enclosed is a check for the following amount: □ \$25 Filing Fee □ \$30 Filing Fee & Certificate of Status	□ \$55 Filing Fee Certified Copy	_

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of
State: NBG Development LLC
2. The Florida document number of this limited liability company is:
3. Jurisdiction of its organization: Pennsylvania
4. Date authorized to do business in Florida: / 7/27/2011
SECTION II (5-9 complete only the applicable changes)
5. New name of the limited liability company: (must contain "Limited Liability Company, ""L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.") 6. If amending the registered agent and/or registered office address on our records, enter-the name of
the new registered agent and/or the new registered office address here:
Name of New Registered Agent: Nick Bennett
New Registered Office Address: 184 Orange Blosson Rd Finter Florida Street Address & & & & & & & & & & & & & & & & & &
Tavernier , Florida 350 60
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.
If Changing Registered Agent, Signature of New Registered Agent
7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

Citle/ Capacity	<u>Name</u>	<u>Address</u>	Type of Action
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aforementioned	amendment(s), duly auther er the law of which this ent	ore than 90 days old, evidencing the nticated by the official having custo tity is organized.	

Filing Fee: \$25.00