

PO 7000124699

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

R.A. Charge
C.COULLIETTE

OCT 20 2008

EXAMINER



October 14, 2008

VIA UPS

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

Re: Change of Registered Office Addresses for Two (2) Florida Corporations

Dear Sir or Madam:

Enclosed please find our check in the amount of \$70.00 representing filing fees for the following documents, which are also enclosed for filing with the Florida Department of State:

1. Cover Letter and Statement of Change of Registered Office for Corporation for **NBSM Corp., Document Number L07000124699.**
2. Cover Letter and Statement of Change of Registered Office for Corporation for **NBSR Corp., Document Number L07000124659.**

Thank you for your assistance in this matter. If you have any questions, please feel free to call me at (407) 515-6983.

Sincerely,

A handwritten signature in cursive script, appearing to read "Colleen Bolena".

Colleen Bolena
Paralegal

Enclosures

CC (w/o enc.): John Classe
Larry Pitt

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: NBSM CORP.
(Name of Corporation)

DOCUMENT NUMBER: P07000124699

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

COLLEEN BOLENA
(Name of Contact Person)

NEW BROAD STREET COMPANIES
(Firm/Company)

420 S ORANGE AVE STE 400
(Address)

ORLANDO FL 32801
(City/State and Zip Code)

For further information concerning this matter, please call:

COLLEEN BOLENA at (407) 515-6983
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: NBSM CORP.
2. The principal office address: 420 S ORANGE AVE STE 400, ORLANDO, FL 32801
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 11/16/2007 Document number: P07000124699
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

DAVID G. PACE

4776 NEW BROAD STREET, SUITE 110

ORLANDO, FL 32814

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

420 S ORANGE AVE STE 400

ORLANDO FL 32801

(P.O. Box NOT acceptable)

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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


(Signature of an officer or director)

DAVID G. PACE, PRES/DIRECTOR
(Printed or typed name and title)

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.


(Signature of Registered Agent)

10/3/08
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

***** FILING FEE: \$35.00 *****

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)