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COVER LETTER

TO: Amendment Section **Division of Corporations** SUBJECT: NLF Billing and Transcriptions, Inc Name of Corporation P18000046963 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: Noel Hernandez Name of Contact Person NLF Billing and transcriptions, Inc. 12345 SW 18 street #210 Address Miami, Fl. 33175 City/State and Zip Code leslieh1972@yahoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Noel Hernandez Name of Contact Person 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

statement of cha	provisions of sections 607.0. ange is submitted for a corpo er to change its registered of	ration organized	l under the laws o	f the State of Flo	rida	
 The name of The principal 	the corporation: NLF Billi I office address: 12345 SV	ng and Trar N 18 Street	nscriptions, la #18, Miami,	nc Fl. 33175		
3. The mailing	address (if different):					
4. Date of incor	poration/qualification: 05/	18/2018	Document num	ber: P180000	046963	
	d street address of the curren rtment of State: (If resigned,	-	t and registered of	ffice on file with	the	
	Lisbet Moya					
	12345 SW 18th Str	eet, 210				
	Miami, Fl. 33175			,	10 de 1	
6. The name and (if changed):	d street address of the new re	gistered agent (i	f changed) and /or	registered office	JUN 14 PH 12: 11	
	Noel Hernandez					E D
	12345 SW 18th Str	•		<u> </u>	2: 19	
	Miami, Fl. 33175	P.O. Box NOT acce	plable		•	
The street address changed will	ess of its registered office ar	nd the street add	ress of the busine	ss office of its re	egistered agent	t.
Such change was authorized by the	as authorized by resolution of board, or the corporation	luly adopted by has been notifie	its board of direc d in writing of the	tors or by an offi e change.	icer so	
- Ku	1049	<u>L</u>	isbet Moya, I	President		
I hereby accept I further agree performance of agent. Or, if th	the appointment as register to comply with the provision my duties, and I am familia is document is being filed method the corporation has been	is of all statutes r with and acce erely to reflect (ree to act in this relative to the proof of the obligation of a change in the re	capacity. oper and comple of my position as visiered office a	registered	
Sign	nature of Registered Agent		015/29	Date		
l l	chalf of an entity:					
Noel Herna	andez					
T	yped or Printed Name					

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