

L02000032826

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300251056413

08/29/13--01011--014 **55.00

FILED
13 OCT -1 PM 2:42
SEALING UNIT
TALLAHASSEE, FLORIDA

J. Shivers OCT 02 2013



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 30, 2013

WILLIAM NICHOLAS
1715 S FLORIDA AVE
LAKELAND, FL 33803

SUBJECT: NICHOLAS HAMIC VENTURES, LLC
Ref. Number: L02000032826

We have received your document for NICHOLAS HAMIC VENTURES, LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 413A00020657

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Nicholas Hamic Ventures
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

William Nicholas
Name of Person
Nicholas Hamic Ventures
Firm/Company
1715 South Florida Ave
Address
Lakeland, Florida 33803
City/State and Zip Code
billnicholas@exitrealtylakeland.com
E-mail address: (to be used for future annual report notification)

RECEIVED
FALL 2013
13 OCT - 1 PM 2:42
FLORIDA

For further information concerning this matter, please call:

William Nicholas at (863 688-2822)
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- \$25.00 Filing Fee
- \$30.00 Filing Fee & Certificate of Status
- \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Nicholas Hamic Ventures LLC dba Exit Realty of Lakeland
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 12/09/2002 and assigned Florida document number L02000032826.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Nicholas New Beginnings LLC

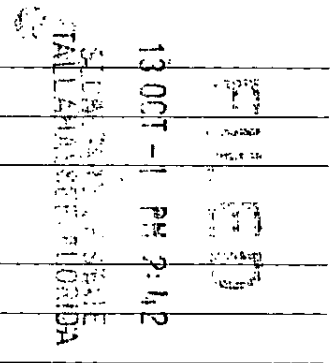
The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)



B. 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: _____

New Registered Office Address: _____

Enter Florida street address

_____, Florida _____

City

Zip Code

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 608, 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

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Michael Hamic	c/o Alberto F. Gomez Jr. 119 South Dakota Ave Tampa, Fl. 33606-1813	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

13 OCT - 1 PM 2:42
 TALLAHASSEE FL ORIDA
 STATE BOARD OF STATE
 OFFICIALS

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Four horizontal dashed lines for amending information.

Dated _____

William Nicholas

Signature of a member or authorized representative of a member

William Nicholas

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

FILED
13 OCT -1 PM 2:42
TALLAHASSEE, FLORIDA