

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000107486

FILED
Apr 15, 2009
Secretary of State

Entity Name: NICOLE ROSE, LLC

Current Principal Place of Business:

723 N LINCOLN LN
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

723 N LINCOLN LN
MIAMI BEACH, FL 33139

New Mailing Address:

FEI Number: 68-0638574 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FILINGS, INC.
3732 N.W. 16TH STREET
FT. LAUDERDALE, FL 333114132 US

Name and Address of New Registered Agent:

PLOSHNICK, SARI
723 N LINCOLN LANE
MIAMI BEACH, FL 33139 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: SARI PLOSHNICK

04/15/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: PLOSHNICK, SARI
Address: 723 N LINCOLN LN
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGR () Delete
Name: PLOSHNICK, SHELLI
Address: 3201 NE 183RD ST APT 2105
City-St-Zip: AVENTURA, FL 33160

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR (X) Change () Addition
Name: PLOSHNICK, SHELLI
Address: 2917 S. OCEAN BLVD APT. 1003
City-St-Zip: HIGHLAND BEACH, FL 33487

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: SARI PLOSHNICK

MGR

04/15/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date