L0700001805

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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Special Instructions to Filing Officer;				
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SECRETARY OF STATE
TALL AHASSEE FLORID

COVER LETTER

Division of Corporations	
•	
SUBJECT: NICHOLAS PROPERTIES, LLC	
(Name of Limited I	Liability Company)
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Ch	ange and fee(s) are submitted for filing.
Please return all correspondence concerning this matt	ter to the following:
PAUL STEWART JR.	
(Name of Person)	<u> </u>
NICHOLAS PROPERTIES, LLC	
(Firm/Company)	
6681 DABNEY STREET	
(Address)	
FORT MYERS, FL 33966	
(City/State and Zip Code)	
For further information concerning this matter, please	e call:
PAUL STEWART JR. at (239	707-6473
(Name of Person)	(Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section Division of Corporations	Registration Section
Clifton Building	Division of Corporations P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314
Tallahassee, Florida 32301	
Enclosed is a check for the following amoun	nt:

☐ \$55 Filing Fee & Certified Copy

\$25 Filing Fee

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

FL 33966		1.0700001005	
		L07000001805	
3. Date of filing/registration in Florida 4. Document n		nber	
5. The name of the regis Florida Department of	tered agent and the r f State: STEWART, PAU	registered office address as shown	on the records of the
		Name	
1426 SE 44TH STREET			
Address		•	
CAPE CORAL, FL 33904 US		TASI O7	
		City, State and Zip	ES &
6. The name and address of the new registered agent		ed agent and/or office:	N 29
	STEWART, PAUL JR		SEO P M
	Name 6681 DABNEY STREET		OT NON 29 PH 12: 52 SECRETARY OF STATE ALLAHASSEE FLORIDA
	Florida street ad	dress (P.O. Box NOT acceptable)	8 2
	FORT MYERS	FL 33966	
		ty, State and Zip	
		•	
confirmed that after the	change or changes a	zed under the laws of the State of the made, the Florida street address nt will be identical. Or, in the case at the change(s) was/were authorized any or as otherwise provided in the bility company.	of the registered office of a Florida limited

(Signature of a member or authorized representative of a member)

PAUL STEWART JR

(Printed or typed name of signee)

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, thereby confirm that the limited liability company has been notified in writing of this change.

(Signature of Registered Agent)