

AUG. 27. 2013. 5:15PM

JONES FOSTER 561 650 0431

NO. 2763 PP. 1 of 1

L07000106347

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : JONES, FOSTER, JOHNSTON & STUBBS, P.A.
Account Number : 076077003231
Phone : (561) 650-0471
Fax Number : (561) 650-0431

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: dpayton@jonesfooster.com

LLC REGISTERED AGENT RESIGNATION
NIKOLAS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$85.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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AUG 29 2013

J. BRYAN

AUG. 27. 2013 5:36PM

JONES FOSTER 561 650 0435

NO. 2763 P. 2

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Nikolas, LLC

Name of Limited Liability Company

DOCUMENT NUMBER: L07000106347

The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

David E. Bowers

Name of Person

Jones Foster Johnston & Stubbs, P.A.

Name of Firm/Company

505 S. Flagler Drive, Suite 1100

Address

West Palm Beach, FL 33401

City/State and Zip Code

dpayton@jonesfooster.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dominique A. Payton at (561) 650-0427

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

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

2013 AUG 28 AM 8:20
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**RESIGNATION OF REGISTERED AGENT FOR A LIMITED
LIABILITY COMPANY**

Pursuant to the provisions of section 608.416(2) or 608.509, Florida Statutes, the undersigned,

JONES FOSTER SERVICE, LLC

, hereby resigns as

Name of Registered Agent

Registered Agent for **NIKOLAS, LLC**

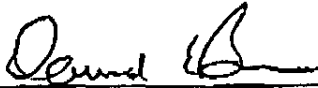
Name of Limited Liability Company

L07000106347

Document Number, if known

A copy of this resignation was mailed to the above listed limited liability company at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.



Signature of Resigning Agent

If signing on behalf of an entity:

David E. Bowers

Typed or Printed Name

Manager

Capacity

FILING FEES:

\$ 85.00	Active limited liability company
\$ 25.00	Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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