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PICK-UP WAIT MAIL (Business Entity Name) 10/25/1301037002 **25.0 (Document Number) 10/25/1301037002 **25.0 Certified Copies Certificates of Status Special Instructions to Filing Officer: 300725	(Address)	200244495382
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FLORIDA DEPARTMENT OF STATE Division of Corporations

October 9, 2013

NIKOLAS, LLC 232 WORTH AVENUE PALM BEACH, FL 33480

SUBJECT: NIKOLAS, LLC Ref. Number: L07000106347

Our records indicate the registered agent for the above named limited liability company resigned on August 28, 2013 and that the limited liability company currently does not have a registered agent designated.

Chapter 608, Florida Statutes, requires this office to give 60 days notice of our intent to dissolve a limited liability company for failure to appoint and maintain a registered agent.

This letter is our notice of intent to dissolve the above named limited liability company 60 days from the date of this letter if a registered agent is not properly designated.

Please designate a new registered agent by doing one of the following: 1) complete the enclosed registered agent designation form, 2) file the current year annual report (if applicable) or 3) file an amended annual report (again; if applicable). Each one of these filings must be submitted with the appropriate filing fee.

If you should need any further information, please contact our office at (850) 245-73 6051.

Gary Blankenbaker Document Specialist Division of Corporations

Letter Number: 813A00028726

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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.

1. Name of the limited liability company: 2. (a) Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) (b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) $0/22/200^{\circ}$ Document number 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: Registered Agent: Registered Office Address: (b) Enter name of NEW Registered Agent and/or NEW Registered Office address: NEW Registered Agent: nahn NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS) If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. 12124.27 Signature of a member or authorized representative of a member 1³¹²224 10 mann \mathcal{D} Printed or typed name of signee ्रीनंगर रहे 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 606, F.S. Or, if this document is being filed to merely reflect a change in the registered office address a hereby confirm that the limited liability company has been notified in writing of this change. Signature of Registered Agent Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00