

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000013161

Entity Name: NICOLE'S NICKELS, LLC.

**FILED**  
**Feb 17, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

348 SW COCONUT KEY WAY  
PORT ST. LUCIE, FL 34986

**New Principal Place of Business:**

**Current Mailing Address:**

348 SW COCONUT KEY WAY  
PORT ST. LUCIE, FL 34986

**New Mailing Address:**

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

WISEBERG, NICOLE A  
348 SW COCONUT KEY WAY  
PORT ST. LUCIE, FL 34986 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: WISEBERG, NICOLE A  
Address: 348 SW COCONUT KEY WAY  
City-St-Zip: PORT ST. LUCIE, FL 34986

I hereby 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: NICOLE A. WISEBERG

MGF

02/17/2011

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