L110000 27627

•		
(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	= #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

: 🕉

Office Use Only



300223085113

03/08/12--01007--008 **25.00

32 MAR −8 AM 10: 43

MAR - 9 2012 T. HAMPTON

COVER LETTER

TO:	Registration S Division of Co		•		
	•	K 1111	(001.11.0		
SUBJI	ECT:		(SOL LLC		
	•	Name of Limi	ted Liability Company		
The en	closed Articles o	f Amendment and fee(s) are sub	omitted for filing.		
Please	return all corresp	ondence concerning this matter	to the following:		
Nikol Solares					
			Name of Person		
Firm/Company					
	700 90th Street				
			Address		
			urfside, Florida 33154		
			City/State and Zip Code		
Nikol@NikolSolares.com E-mail address: (to be used for future annual report notification)				tion)	
For fur	ther information	concerning this matter, please c			
	N	likol Solares	at (786) 48	38-9851	
Name of Person		of Person	Area Code & Daytime T	clephone Number	
Enclose	ed is a check for t	the following amount:			
₽\$ 25	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	MAIT	INC ADDRESS.	cTheer/colunie	ANNDECC.	

MAILING ADDRESS:

TO:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED SECRETARY OF STATE DIVISION OF COMPORATIONS

92 MAR -8 AM 10: 43

NIKSOL LLC				
(Name of the Limited Liability Company as it n (A Florida Limited Liability C	ow appears on our records.) Company)			
The Articles of Organization for this Limited Liability Company were file	ed on03/07/2011 and assigned			
Florida document numberL11000027627				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liability com	npany here:			
Nikol Solares LLC	-			
The new name must be distinguishable and end with the words "Limited Liabi "L.L.C."	lity Company," the designation "LLC" or the abbreviation			
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRESS)				
Enter new mailing address, if applicable:	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
(Mailing address MAY BE A POST OFFICE BOX)				
 				
B. If amending the registered agent and/or registered office address here:	lress on our records, enter the name of the new			
Name of New Registered Agent:				
New Registered Office Address:				
Enter Florida street address				
	, Florida			
City	Zip Code			

New Registered Agent's Signature, if changing Registered Agent:

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

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = N	MGRM = Managing Member				
<u>Title</u>	<u>Name</u>	Address	Type of Action		
			Add Remove		
			Add Remove		
			Add Remove		
			Add Remove		
	***************************************		Add Remove		
			Add Remove		
D. If amen	ding any other information, enter chang	e(s) here: (Attach additional sheets, if necessary.)	- 32 1710 181		
			SECRETARY OF CONTINUES OF CONTI		
			AHIO: 43		
Dated	nanch 5. 20	12/1	V'		
	Signature of a member	or authorized representative of a member			
		Nikol Solares			
	Typed	or printed name of signee			

Page 2 of 2

Filing Fee: \$25.00