L140001744F6

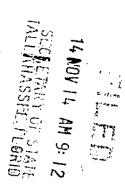
(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only



300266199703

11/14/14--01036--010 **30.00



The NON S 1 SO14

COVER LETTER

TO: Registration Section * * **Division of Corporations** NICKSWETART LLC SUBJECT: Name of Limited Liability Company Dear Sir or Madam: The enclosed Statement of Correction and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: JOSE ZAMBRANO Name of Person NICKSWETART LLC Firm/Company **12610 NE 1ST COURT** NORTH MIAMI FLORIDA 33161 City/State and Zip Code NICKSWEETART@AOL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: JOSE ZAMBRANO 312-7059 Name of Person Daytime Telephone Number STREET/COURIER ADDRESS: MAILING ADDRESS: Registration Section

Registration Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Enclosed is a check for the following amount:

\$30 Filing Fee & Certificate of Status

□ \$55 Filing Fee & Certified Copy

□ \$60 Filing Fee, Certificate of Status & Certified Copy

CR2E062 (2/14)

STATEMENT OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursu	ant to s	ection 605.0209, F.S., this document is	•	ously filed document		
FIRST: SECOND:		The name of the limited liability comp	pany is:			
		The Florida Document number of the limited liability company is: L14000174480				
THIRD:		Document to be corrected is:				
		NAME OF THE COMPANY				
	<u>(CI</u>	HECK THE APPROPRIATE BOX AND	COMPLETE THE APPLICABL	E STATEMENT		
	correc	tins an incorrect statement. The incorrected statement are as follows:			:he	
	THE	NAME OF THE COMPANY IS MISS	SPELLING, ONE LETTER IS N	MISSING		
	THE	THE NAME APPEAR NICKSWETART LLC				
	THE NAME SHOULD BE NICKSWEETART LLC					
	<u> </u>					
	<u>OR</u>					
		defectively signed. The manner in which tion are as follows:	h the document was defectively s	igned and the appropr	iate	
				IALLU		
					•	
				SST F		
	<u>OR</u>			PAIR PAIR		
	The	lectronic transmission of the record was	defective.			
···		Juefue 1	11-12-2014			
Si	gnature	of Authorized Representative	Date	-		

Filing Fee: Certified Copy: \$25.00

\$30.00 (optional)