

# L180000207493

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

\_\_\_\_\_  
(Business Entity Name)

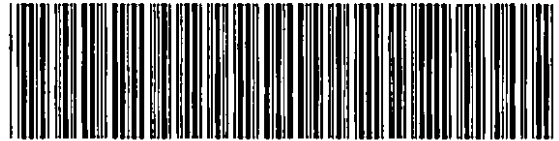
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(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

NC - name change  
Amendment

Office Use Only



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2018 SEP - 6 AM 8:51

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

N CULLIGAN

SEP 6 2018

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Nichols Renovations and Repairs LLC

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Earnest Nichols III

\_\_\_\_\_  
Name of Person

Nichols Renovations and Repairs LLC

\_\_\_\_\_  
Firm/Company

8420 NW 13TH CT

\_\_\_\_\_  
Address

OCALA FL 34475

\_\_\_\_\_  
City/State and Zip Code

EARNESTNIII@GMAIL.COM

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

For further information concerning this matter, please call:

Earnest Nichols III

352

362-6671

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

Enclosed is a check for 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)

**MAILING ADDRESS:**  
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

Effective date for this filing 08/24/2018

Certificate of Status Requested Yes

Certified Copy Requested No

Limited Liability Company Name NICHOLS RENOVATIONS AND REPAIRS. LLC.

**Principal Place of Business**

Address 8420 NW 13TH COURT

Suite, Apt. #, etc.

City, State OCALA, FL

Zip Code & Country 34475,

**Mailing Address**

LIMITED LIABILITY COMPANY MAILING ADDRESS SAME AS PRINCIPAL ADDRESS.

**Name and Address of Registered Agent**

Name (Last, First, Middle, Title) NICHOLS, EARNEST, III

Address 8420 NW 13TH COURT

Suite, Apt. #, etc.

City, State OCALA, FL

Zip Code & Country 34475, US

Registered Agent Signature EARNEST NICHOLS III

**Any Other Provision(s) - Optional (Purpose, Statements, etc.)**

**Correspondence Name And E-mail Address**

Name and e-mail address to whom correspondence should be e-mailed

Name EARNEST NICHOLS

E-mail Address EARNESTNIII@GMAIL.COM

**Signature of a member or an authorized representative**

Signature EARNEST NICHOLS

**Name And Address of Person(s) Authorized to Manage LLC**

**Name And Address #1**

Title MGR

Name (Last, First, Middle, Title) NICHOLS, EARNEST III

Street Address 8420 NW 13TH COURT

City, State OCALA, FL

Zip Code & Country 34475

Continue



If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
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		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change

**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

2018 SEP -6 AM 8:51  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

**E. Effective date, if other than the date of filing:** \_\_\_\_\_ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated September 5, 2018 6:38

Ernest Nichols III

Signature of a member or authorized representative of a member

Ernest Nichols III

Typed or printed name of signee