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| (Requestor's Name) | | | | |
|---|------------------|-------------|--|--|
| (Address) | | | | |
| (Add | dress) | | | |
| (City | y/State/Zip/Phon | e #) | | |
| PICK-UP | MAIT | MAIL | | |
| (Business Entity Name) | | | | |
| • | • | , | | |
| (Document Number) | | | | |
| Certified Copies | _ Certificate | s of Status | | |
| Special Instructions to Filing Officer: | | | | |
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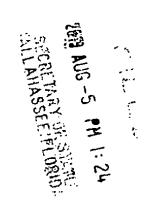




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COVER LETTER

TO:

Registration Section Division of Corporations

| NICK'S CLEANING AND TRANSPORTATION, LLC |
|---|
|---|

SUBJECT:

INHS18 (2/14)

Name of Limited Liability Company

NO 5 W 1.24

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

| NICO SEJOUR | |
|--|---|
| Name of Person | |
| NICK'S CLEANING AND TRANSPORTA | ATION, LLC |
| Firm/Company | |
| 6301 NORTH MIAMI AVENUE | |
| Address | |
| MIAMI, FLORIDA 33150 | |
| City/State and Zip Code | |
| ticosejour@gmail.com | |
| E-mail address: (to be used for future annua | l report notification) |
| For further information concerning this matter, p | lease call: |
| NICO SEJOUR | 786 4366066 |
| Name of Person | Area Code & Daytime Telephone Number |
| STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 | MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 |
| Enclosed is a check for the following a | mount: |
| □ \$25 Filing Fee | ☑ \$55 Filing Fee & Certified Copy |

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, 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. No | ame of the limited liability company: NICK'S Cl | LEANING AND T | RANSPORTATION, LLC |
|--------------------|---|----------------------------|--|
| 2 _: (a) | 6301 NORTH MIAMI AVENUE | ,(b) 6301 | 1 NORTH MAIMI AVENUE |
| , \ / | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | | Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) |
| | MIAMI, FLORIDA 33150 | MIAM | MI, FLORIDA 33150 |
| | 09/07/2018 | L1800 | 00213326 |
| 3. | Date of filing/registration in Florida | 4. | Document number |
| 5. (a) | 20621 NW 10TH AVENUE | | |
| J. (u) | Registered Agent and Registered Office shown on the record | ds of the Florida Dept. of | State: |
| | MIAMI, FLORIDA 33169 | | |
| | Registered Office Address (MUST BE FLORIDA STRE | EET ADDRESS) | |
| | 20621 NW 10TH AVENUE | | |
| | MIAMI, FLORIDA | , FL_33169 | AUG |
| (b) | NICO SEJOUR | | AHASSEE F |
| | Enter name of NEW Registered Agent and/or NEW Regist | tered Office address: | |
| | 6301 NORTH MIAMI AVENUE, MIAMI, FL 33150 | | PH 1: 24 |
| | NEW Registered Office Address: | | |
| | 6301 NORTH MIAMI AVENUE | | |
| | | | |

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.

NICO SEJOUR

Signature of a member or authorized representative of a member

Printed or typed name of signee

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 605, 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.

Signature of Registered Agent

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

FILING FEE: \$25.00