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(City/State/Zip/Phone #)

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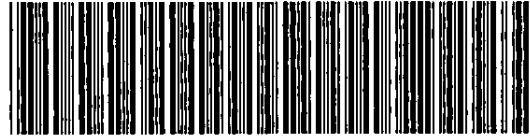
(Business Entity Name)

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TALLAHASSEE, FL 32309

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: NICA ENTERPRISE LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

SIMON B HOWELL

Name of Person

HOWELL INTERNATIONAL TAX

Firm/Company

8701 W. IRLO BRONSON MEMORIAL HWY, SUITE 100

Address

KISSIMMEE, FLORIDA 34747

City/State and Zip Code

SIMON.HOWELL@HOWELLINTERNATIONALTAX.COM

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

2014 NOV 25 PM 3:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

SIMON B HOWELL at (**407**) **245-7600**

Name of Contact Person

Area Code

Daytime Telephone Number

MAILING ADDRESS:

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

STREET ADDRESS:

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

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO
TRANSACTION BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A
FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:*

1. **NICA ENTERPRISE LLC**

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. **NEW YORK STATE, USA**

(Jurisdiction under the law of which foreign limited liability company is organized)

3. **NOT APPLICABLE**

(FEI number, if applicable)

4. **NOT APPLICABLE**

(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. **3920 GREENPOINT AVE, APT 20**

SUNNY SIDE, NEW YORK 11104

(Street Address of Principal Office)

6. **8215 SOUTH 69TH EAST AVE**

TULSA, OKLAHOMA 74133

(Mailing Address)

7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

AKBAR H CHOWDHURY, MEMBER

8215 SOUTH 69TH EAST AVE

TULSA, OKLAHOMA 74133

8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)



Signature of an authorized person

(In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

SIMON B HOWELL

Typed or printed name of signee

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

NICA ENTERPISE LLC

If unavailable, the alternate to be used in the state of Florida is:

2. The name and the Florida street address of the registered agent and office are:

SIMON B HOWELL, HOWELL INTERNATIONAL TAX

(Name)

8701 W. IRLO BRONSON MEMORIAL HWY, SUITE 100

Florida Street Address (P.O. Box NOT ACCEPTABLE)

KISSIMMEE

FL 34747

City/State/Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating 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, Florida Statutes.

(Signature)

\$125
fee.

\$ 100.00

\$ 25.00

\$ 30.00

\$ 5.00

Filing Fee for Application

Designation of Registered Agent

Certified Copy (optional)

Certificate of Status (optional)

2014 MAY 25 PM 3:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

State of New York
Department of State } ss:

I hereby certify, that NICA ENTERPRISE LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 10/24/2012, and that the Limited Liability Company is existing so far as shown by the records of the Department.



*WITNESS my hand and the official seal
of the Department of State at the City of
Albany, this 10th day of November two
thousand and fourteen.*

Anthony Scardino

Executive Deputy Secretary of State