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COVER LETTER

	COVER LETTER
TO: Registe	ration Section on of Corporations
M SUBJECT:	Ir.Nick, LLC
SUBJECT	Name of Limited Liability Company
The enclosed "A Existence, and o	Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of check are submitted to register the above referenced foreign limited liability company to transact business in Florida.
Please return all	l correspondence concerning this matter to the following:
	Nicol Charles Horn
	Name of Person
	Mr.Nick, LLC
	Firm/Company
	14213 Old Dixie Highway
	Address
	Hudson, FL 34667
	City/State and Zip Code
	HORN_NICK@HOTMAIL.COM
	E-mail address: (to be used for future annual report notification)
For further info	rmation concerning this matter, please call:
Nicol	Horn 727 723-9852 at ()
	Name of Contact Person Area Code Daytime Telephone Number
Divisio Regista P.O. B	LING ADDRESS: on of Corporations ration Section Registration Section Rox 6327 Rossee, FL 32314 Section Section Clifton Building Clifton Buildi
	heck for the following amount: 5.00 Filing Fee \$\Bigcup \$130.00 Filing Fee & Certificate Certificate of Status \$\Bigcup Certified Copy

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

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

	ame adopted for the purpose of transacting business in	Florida The alte	ernate name must include "Limited Lia	bility Company," "L.L.C." or "LLC.")
Delaware		3	82-1726421	
	hich foreign limited hability company is organized)	. 3.	(FEI num	ber, if applicable)
	(Date first transacted business in Florida, if prio (See sections 605 0904 & 605 0905, F.S. to det	r to registration.) ermine penalty h	ability)	
14213 Old Dixie High (Street Address of	way	6.	14213 Old Dixie Highway	· · · · · · · · · · · · · · · · · · ·
	rincipal Office)	_	(Mailing Add	iress)
Hudson, FL 34667		_	Hudson, FL 34667	
		_		- 33
Name and street address	ss of Florida registered agent: (P.O. E	Box <u>NOT</u> a	cceptable)	ress) 800 PH 8
Name:	C T Corporation System			
	1200 South Pine Island Road			
Office Address.				
Office Address:			22204	~ , *
gistered agent's acceptiving been named as resignated in this applications	Plantation (City)	it as registe.	red agent and agree to act	I liability company at the po in this capacity. I further duties, and I am familiar w
egistered agent's accep aving been named as re ssignated in this applica comply with the provis ad accept the obligation	Plantation (City) tance: rgistered agent and to accept service tion, I hereby accept the appointmentions of all statutes relative to the project of my position as registered agent. C T Corporation System (Registered agent)	nt as register per and con mt's signature)	(Zip excort the above stated limited agent and agree to act inplete performance of my	I liability company at the po in this capacity. I further duties, and I am familiar w
egistered agent's accep aving been named as re esignated in this applica comply with the provis ad accept the obligation	Plantation (City) tance: rgistered agent and to accept service tion, I hereby accept the appointmentions of all statutes relative to the profits of my position as registered agent. C T Corporation System	per and con """ "" s signature) has/have a	(Zip excort the above stated limited agent and agree to act inplete performance of my	I liability company at the po in this capacity. I further duties, and I am familiar w
egistered agent's acceptaint been named as resignated in this applicate comply with the provised accept the obligation. The name, title or capa	Plantation (City) tance: rgistered agent and to accept service tion, I hereby accept the appointmentions of all statutes relative to the profess of my position as registered agent. C T Corporation System (Registered agent accity and address of the person(s) who	per and con """ "" s signature) has/have a	or the above stated limited red agent and agree to act applete performance of my Danny Verdecchia-Asst	I liability company at the po in this capacity. I further duties, and I am familiar w Secretary
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Typed or printed name of signee

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "MR.NICK, LLC" IS DULY FORMED UNDER THE

LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A

LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF

THE EIGHTH DAY OF OCTOBER, A.D. 2018.





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Date: 10-08-18