## 10000683

, (Requestor's Name)				
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PICK-UP	☐ WAIT	MAIL MAIL		
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Ps. class

## **COVER LETTER**

Amendment Section Division of Corporations

TO:

	NICOLAS BLISIN	ESS CDOLID INC		
SUBJECT:	NICOLAS BUSINESS GROUP, INC.  (Name of Corporation)			
	P040000656	642		
DOCUMENT NUMBER:	F0400000	043		
The enclosed Statement of Ch	ange of Registered Office	Agent and fee are submitted for filing.		
Please return all corresponden	ce concerning this matter	to the following:		
	VIANNI DEC	<del></del> :		
(Name of Contact Person)				
NICOLAS BUSINESS GROUP, INC. (Firm/Company)				
	(Firm/Co	ompany)		
		•		
	3399 NW 72 AVE	SUITE 217		
(Address)				
	MIAMI, FL 3	33122		
	(City/State ar	nd Zip Code)		
For further information concer	rning this matter, please o	all:		
VIANNI DECENA		at ( )		
(Name of Con	act Person)	at () (Area Code & Daytime Telephone Number)		
Enclosed is a \$35.00 check ma	ade payable to the Depart	ment of State.		
<u>Maili</u>	ng Address: ndment Section	Street Address: Amendment Section		
	sion of Corporations	Division of Corporations		
	Box 6327	Clifton Building		

Tallahassee, FL 32301

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of change is su	bmitted for a corporation organiz	2, 607.1508, or 617.1508, Florida Statutes, this ized under the laws of the State of FLORIDA red agent, or both, in the State of Florida.
1. The name of the corpo	ration: NICOLAS BUSINESS GF	ROUP, INC.
	dress: 3399 NW 72 AVE MIAMI,	
3. The mailing address (i	different):	
4. Date of incorporation/o	qualification: 04/21/2004	Document number: P04000065643
5. The name and street ac Florida Department of		gent and registered office on file with the
	WALID SAB	BAGH
	10710 NW 66 ST	f SUITE 407
	MIAMI, FL 3	3178 ZFC 06
6. The name and street act (if changed):	ldress of the new registered agen	A TE 217
	VIANNI DECEN	A Fig. 3
	3399 NW 72 AVE SUI	TE 217
	(P.O. Box NOT acceptable)	, <b>)</b>
•	MIAMI, FL 33122	
The street address of its as changed will be ident	registered office and the street sical.	address of the business office of its registered agent,
Such change was authorauthorized by the board	rized by resolution duly adopted, or the corporation has been no	by its board of directors or by an officer so tified in writing of the change.
(Signature of an of	ncer or director)	VIANNI DECENA PRESIDENT (Printed or typed name and title)
I hereby accept he app I further agree to comp of my duties, and I um f document is being filed corporation has been no	pintment as registered agent and y with the provisions of all state amiliar with and accept the oblumerely to reflect a change in the otified in writing of this change.	d agree to act in this capacity. utes relative to the proper and complete performance igation of my position as registered agent. Or, if this e registered office address, I hereby confirm that the
1/4	$\mathcal{M}$	10/06/06
	Registered Agent)	(Date)
If signing on behalf of a	n entity:	
(Typed or Pr	inted Name)	

\* \* \* FILING FEE: \$35.00 \* \* \*