## P08000095424

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## **COVER LETTER**

TO: Amendment Section Division of Corporations		
SUBJECT: NICHOLSON HOLDINGS' INC.  Name of Corporation		
DOCUMENT NUMBER: 108000095424		
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
DAVID & DICHOLSON  Name of Contact Person  NICHOLSON HOLD INGS INC  Firm/Company  Po Box 1626  Address		
WINTER HAVEN, FL, 33882  City/State and Zip Code  Hepcolcaptain Com  E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
DAVID DICHULSOD at (863) 242 6352  Name of Contact Person Area Code & Daytime Telephone Number		
Enclosed is a \$35.00 check made payable to the Department of State.		
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327  Street Address: Amendment Section Division of Corporations Clifton Building		

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLOCOA in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: NICHOLSON HOLDINGS, INC  2. The principal office address: 250 Seo STREET NW, SUITE 300, WINTER WAVEN FL, 3388 I  3. The mailing address (if different): PO BOX 1626, WINTER HAVEN, FL, 3388 2
4. Date of incorporation/qualification: 10 22/2008 Document number: PO8000095424
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)  DAVID E DICHOLSON  387 TIUCH CIRCLE,  DAVENBOR FL, 33837  6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  DAVID E DICHOLSON  250 380 STUES SUTE 300  P.O. Box NOT acceptable  WINTER WAVEN FL 3388
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.  Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.    Authorized by the board, or the corporation has been notified in writing of the change.    Printed or typed name and title

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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