# P140000 1688

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



700257678757

03/13/14--01014--021 \*\*35.00

14 APR 28 PM L: 02

Amena

MAY - 6 2014 T. CARTER



Itans Cornected
Thank You MECEIVED
MAPR 28 PM 2:52

## FLORIDA DEPARTMENT OF STATE Division of Corporations

March 13, 2014

NICOLE A CHARETTE, PRESIDENT NICOLETTE MANAGEMENT INC 5916 AUVERS BLVD APT #106 ORLANDO, FL 32807 US

SUBJECT: NICOLETTE MANAGEMENT INC

Ref. Number: P14000016888

We have received your document for NICOLETTE MANAGEMENT INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A post office box is not an acceptable address for the registered agent.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tina D Carter Regulatory Specialist

Letter Number: 914A00005519

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: NICOLET	TE MANAGE	MENT INC			
DOCUMENT NUMBER: P14000016888						
The enclosed Articles of Amendment and fee are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
	NICOLE A CHARETTE, PRESIDENT					
	Name of Contact Person NICOLETTE MANAGEMENT INC					
	Firm/ Company 5916 AUVERS BLVD APT#106					
	ORLANDO, FL	Address _ 32807				
		City/ State and Zip Cod	е			
For further informatio	E-mail address: (to be use no concerning this matter, pleas	sed for future annual report	notification)			
FRANK ABALO			. 681-0411			
	of Contact Person	at (407) 681-0411  Area Code & Daytime Telephone Nur				
Enclosed is a check for	r the following amount made	payable to the Florida Depa	artment of State:			
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address  Amendment Section  Division of Corporations  P.O. Box 6327  Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle				

Tallahassee, FL 32301

### Articles of Amendment to Articles of Incorporation of



# NICOLETTE MANAGEMENT INC

14 APR 28 PH 4: 02

(Name of Corporation as currently filed with the	Florida Dept, of State)
P1400001688	8
(Document Number of Corporation (	(if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	PO BOX 5214 WINTER PARK, FL 32793
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	
Name of New Registered Agent	
	BLVD APT 106
·	reet address)
New Registered Office Address: ORLANDO	, Florida 32807
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	with and accept the obligations of the position.
Signature of New Registered .	Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe				
X Remove	$\underline{\mathbf{V}}$	Mike Jones				
X Add	<u>sv</u>	Sally Smith				
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s		
1) Change	V	DEBOR	AH CHARETTE	PO BOX 5214		
Add	<del></del>	_		WINTER PARK, FI	L <b>3</b> 2793	
Remove						
2) Change						
Add						
Remove						
3) Change		-				
Add						
Remove						
4) Change	<del> </del>			<del></del>		
Add						
Remove						
5) Change						
Add						
Remove				<del></del>		
6) Change						
Add						
Remove						

. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
N/A
. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)

The date of each amendment(s) adoption: MARCH 10, 2014		
date this document was signed.		
Effective date if applicable: MARCH 10, 2014		
(no more than 90 days after amendment file date)		
Adoption of Amendment(s) (CHECK ONE)		
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.		
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):		
"The number of votes cast for the amendment(s) was/were sufficient for approval		
by"		
(voting group)		
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.		
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.		
Dated MARCH 10, 2014 Signature		
(By a director, president or other officer - if directors or officers have not been		
selected, by an incorporator – if in the hands of a receiver, trustee, or other court		
appointed fiduciary by that fiduciary)		
NICOLE A CHARETTE		
(Typed or printed name of person signing)		
PRESIDENT		
(Title of person signing)		