

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000198959

**Entity Name:** NIKKI VOGEL LLC

**Current Principal Place of Business:**

11000 S GARDENS DR  
APT 107  
PALM BEACH GARDENS, FL 33418

**Current Mailing Address:**

1743 YORK AVE  
UNIT 30H  
NEW YORK, NY 10128 US

**FEI Number:** 81-1797341

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

VOGEL, NICOLE A  
11000 S GARDENS DR  
APT 107  
PALM BEACH GARDENS, FL 33418 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGR  
Name VOGEL, NICOLE  
Address 11000 S GARDENS DR  
City-State-Zip: APT 107 FL 33418

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** NICOLE VOGEL

**OWNER**

**04/26/2019**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date