

Form Revision Date 07/2016

## **ANNUAL STATEMENT**

(Required by Section 207, Act 23, Public Act of 1993)

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Identification Number:		802156139	
Annual Statement Filing Year: 2020			
I. Limited Liability Company Name:			
NICHOLE ALYSE LLC			
2. The street address of the limited liability company's registered office and name of the resident agent at that office:  1. Resident Agent Name: NICOLE A. MONTGOMERY			
2. Street Address:	15886 FAIRFAX ST.		
Apt/Suite/Other:			
City:	SOUTHFIELD		
State:	MI	Zip Code: 48075	
3. Mailing address of the registered office:			
P.O. Box or Street Address:	15886 FAIRFAX ST.		
Apt/Suite/Other:			
City: State:	SOUTHFIELD	7in Codo:	
State:	MI	Zip Code: 48075	
This annual statement must be signed by a member, manager, or an authorized agent.			
Signed this 25th Day of July, 2020 by:			
Signature		Title	Title if "Other" was selected
Nicole A Montgomery		Memher	

By selecting ACCEPT, I hereby acknowledge that this electronic document is being signed in accordance with the Act. I further certify that to the best of my knowledge the information provided is true, accurate, and in compliance with the Act.

jm Decline jm Accept

## MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS FILING ENDORSEMENT

This is to Certify that the 2020 ANNUAL STATEMENT

for

NICHOLE ALYSE LLC

*ID Number:* 802156139

received by electronic transmission on July 25, 2020 , is hereby endorsed.

Filed on July 25, 2020 , by the Administrator.

The document is effective on the date filed, unless a subsequent effective date within 90 days after received date is stated in the document.



In testimony whereof, I have hereunto set my hand and affixed the Seal of the Department, in the City of Lansing, this 25th day of July, 2020.

Linda Clegg, Interim Director

Corporations, Securities & Commercial Licensing Bureau