

# **2013 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P12000057268

Entity Name: NFN SERVICES INC

**FILED**  
**Oct 14, 2013**  
**Secretary of State**

## **Current Principal Place of Business:**

101 NW 47 AVE  
APT 4  
MIAMI, FL 33126 US

## **New Principal Place of Business:**

431 NW 46TH ST.  
POMPANO BEACH, FL 33064 US

## **Current Mailing Address:**

101 NW 47 AVE  
APT 4  
MIAMI, FL 33126 US

## **New Mailing Address:**

431 NW 46TH ST.  
POMPANO BEACH, FL 33064 US

FEI Number: 45-5587958

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SILVA, FABIO L  
101 NW 47 AVE  
APT 4  
MIAMI, FL 33126 US

## **Name and Address of New Registered Agent:**

SILVA, FABIO L  
431 NW 46TH ST.  
POMPANO BEACH, FL 33064 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: FABIO L SILVA

10/14/2013

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Title: P  
Name: SILVA, FABIO L  
Address: 431 NW 46TH ST.  
City-St-Zip: POMPANO BEACH, FL 33064 US

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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: FABIO L SILVA

P

10/14/2013

Electronic Signature of Signing Officer or Director

Date