

2021 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L19000107545

Entity Name: NF REPRESENTATIVE, LLC

Current Principal Place of Business:

11437 CENTRAL PARKWAY
SUITE 105
JACKSONVILLE, FL 32224

Current Mailing Address:

P.O. BOX 16568
JACKSONVILLE, FL 32245

FEI Number: 83-4570691

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MARMELSTEIN, ERIN
11437 CENTRAL PARKWAY
SUITE 105
JACKSONVILLE, FL 32224 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: ERIN MARMELSTEIN

02/02/2021

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name GREENE, C. CAMERON M.D.
Address 1306 BEACH AVENUE
City-State-Zip: ATLANTIC BEACH FL 32233

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: C. CAMERON GREENE, M.D.

MANAGER

02/02/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date