PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
99 JUL 20 PM 3:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #J93039

1. Corporation Name

NORFIELD, INC.

Principal Place of Business / Mailing Address

~~5572A North Ocean Blvd.~~
~~OCEAN Ridge, Florida 33435~~

REINSTATEMENT 98-99

SP

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable
Suite, Apt. #, etc: 7301-A W. Palmetto Pk. Rd.
Suite 305C
City & State: Boca Raton, FL.
Zip: 33433 Country: USA

3. New Mailing Office Address, If Applicable
Suite, Apt. #, etc: 7301-A W. Palmetto Pk. RD.
Suite 305C
City & State: Boca Raton, FL
Zip: 33433 Country: USA

4. Date Incorporated or Qualified To Do Business in Florida: 09/18/87

5. FEI Number: 65-0009627 Applied For ☐ Not Applicable ☐

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
PD	Ronning, Jens Peter	7301-A W. Palmetto Pk.Rd. Suite 305C	33433 Boca Raton, FL

100002938951---6
-07/22/99--01081--011
****900.00 ****900.00

8. Name and Address of Current Registered Agent

Ronning, Jens Peter
5572A North Ocean Boulevard
Ocean Ridge, FL 33435

9. Name and Address of New Registered Agent

Name: Sciarretta, Edmund C.
Street Address (P.O. Box Number is Not Acceptable): 7301-A West Palmetto Pk Rd.
Suite, Apt. #, Etc: Suite 305C
City: Boca Raton
State: FL Zip Code: 33433

CR2E081 (12/96)

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent: Edmund Sciarretta
REGISTERED AGENT MUST SIGN

Date: 7/7/99

11. This corporation owes the current year Intangible Personal Property Tax due June 30. Yes ☐ No ☒

(See other side for information on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in Chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate and my signature shall have the same legal effect as if made under oath.

SIGNATURE: J. Peter R.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
JENS PETER RONNING

7/14/99
Date

Daytime Phone #