2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 08, 2012
Secretary of State

DOCUMENT# L00000007598

Entity Name: NFOFS HOLDINGS, L.L.C.

Current Principal Place of Business:

4133 UNIVERSITY BLVD SOUTH
BLDG 3
JACKSONVILLE, FL 32216

New Principal Place of Business:

3007 HARTLEY ROAD
JACKSONVILLE, FL 32257

Current Mailing Address:

4133 UNIVERSITY BLVD SOUTH
BLDG 3
JACKSONVILLE, FL 32216

New Mailing Address:

11481 OLD ST. AUGUSTINE ROAD
SUITE 203
JACKSONVILLE, FL 32258

FEI Number: 59-3681862 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HARTLEY, GREGORY W DMD
4133 UNIVERSITY BLVD S.
#3
JACKSONVILLE, FL 32216 US

Name and Address of New Registered Agent:

HARTLEY, GREGORY W DMD
11481 OLD ST. AUGUSTINE ROAD
SUITE 203
JACKSONVILLE, FL 32258 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: 02/08/2012
Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: HARTLEY, GREGORY W DMD
Address: 11481 OLD ST. AUGUSTINE ROAD, SUITE 203
City-St-Zip: JACKSONVILLE, FL 32258

Title: MGRM
Name: WOODS, DAVID D DMD
Address: 11481 OLD ST. AUGUSTINE ROAD, SUITE 203
City-St-Zip: JACKSONVILLE, FL 32258

Title: MGRM
Name: O'BRIEN, DAVID A DMD
Address: 11481 OLD ST. AUGUSTINE ROAD, SUITE 203
City-St-Zip: JACKSONVILLE, FL 32258

I hereby certify that the information indicated on this 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 608, Florida Statues.

SIGNATURE: GREGORY W. HARTLEY, DMD MGRM 02/08/2012
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date