(1)

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
1997 NOV -5 PM 12:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P30879

1. Corporation Name

NICAR ENTERPRISES, INC.

Principal Place of Business	Mailing Address
222 HIGH STREET, SUITE 300 HAMILTON, OH 45011	SAME

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

DO NOT WRITE IN THIS SPACE

2. New Principal Office Address, If Applicable	3. New Mailing Address, If Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. Date Incorporated or Qualified To Do Business in Florida: September 6, 1990

5. FEI Number: 31-1299448 (Applied For / Not Applicable)

6. CERTIFICATE OF STATUS DESIRED [X] ($ 78 Additional Fee required for Certificate of Status)

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

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City/State/Zip
	SEE ATTACHED		

900002840909--8
-117067--01120--004
****923.75 ****923.75

REINSTATEMENT

8. Name and Address of Current Registered Agent	9. Name and Address of New Registered Agent
JEFF WILSON THE GREAT STEAK & FRY COMPANY SAWGRASS MILLS 12001 WEST SUNRISE BLVD. SUNRISE, FL 33324	Name: C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable): 1200 S. PINE ISLAND ROAD Suite, Apt. #, Etc.: City: PLANTATION / State: FL / Zip Code: 33324

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: Connie Bryan — JONNIE BRYAN SPECIAL ASSISTANT SECRETARY — Date: 11/5/97
(REGISTERED AGENT MUST SIGN)

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☒ (See other side for information on intangible tax.)

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3) (k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access.) 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., and that all fees owed by the corporation have been paid. 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: [signature] PAT LANNI 11-4-97 (513) 896-9695
SIGNATURE AND TYPED OR PRINTED NAME SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

(FLA. - 2113 - 3/7/96)

(2)

Addendum

1. Title: PRESIDENT/CHAIRMAN OF THE BOARD
   Name: NICK LANNI
   Street address: 222 HIGH STREET
   City, State and Zip: HAMILTON, OH 45011

   Title: VICE PRESIDENT/DIRECTOR
   Name: PAT LANNI
   Street address: 222 HIGH STREET
   City, State and Zip: HAMILTON, OH 45011

   Title: SECRETARY/TREASURER
   Name: DEBORAH BUCKLEY
   Street address: 222 HIGH STREET
   City, State and Zip: HAMILTON, OH 45011

   Title: DIRECTOR
   Name: NANCI LANNI
   Street address: 222 HIGH STREET
   City, State and Zip: HAMILTON, OH 45011