

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

STATE OF FLORIDA
TALLAHASSEE

1995



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AND
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05 MAR -8 AM 7:40

DOCUMENT # P94000088788 (2)

NLF, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 SE 2ND AVENUE
DEERFIELD BEACH FL 33441

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DEERFIELD BEACH FL 33441

DO NOT WRITE IN THESE SPACES

3. Date incorporated or qualified 12/05/1994	3a. Date of last report
4. FID Number 65-0543937	Applied for Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.022, Florida Statutes ☒ Yes ☐ No	

2. Principal Office Address 21	2a. Mailing Address 26
22	27
23	28
24	25
29	30

9. Name and Address of Current Registered Agent

DICKEY, JACQUELINE P
15 SE 2ND AVENUE
DEERFIELD BEACH FL 33441

10. Name and Address of New Registered Agent

81. Name	
82. Street Address (P.O. Box Number is Not Acceptable)	
83.	
84. City	FL
85. Zip Code	

11. Pursuant to the provisions of Sections 607.0507 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Sections 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. NAME D DICKEY, KARL 15 SE 2ND AVENUE DEERFIELD BEACH FL 33441	1.1 TITLE PRESIDENT ☐ Change ☒ Addition
2. NAME D DICKEY, JACQUELINE P 15 SE 2ND AVENUE DEERFIELD BEACH FL 33441	2.1 TITLE CHIEF EXECUTIVE OFFICER ☐ Change ☒ Addition
3. NAME D DICKEY, KARLTON 15 SE 2ND AVENUE DEERFIELD BEACH FL 33441	3.1 TITLE VICE PRESIDENT ☐ Change ☒ Addition
4. NAME D GWINN, KARLA 15 SE 2ND AVENUE DEERFIELD BEACH FL 33441	4.1 TITLE SECRETARY ☐ Change ☒ Addition
5. NAME	5.1 TITLE ☐ Change ☐ Addition
6. NAME	6.1 TITLE ☐ Change ☐ Addition
7. NAME	7.1 TITLE ☐ Change ☐ Addition
8. NAME	8.1 TITLE ☐ Change ☐ Addition
9. NAME	9.1 TITLE ☐ Change ☐ Addition
10. NAME	10.1 TITLE ☐ Change ☐ Addition

14. I hereby certify that the above information is true and correct, and that the corporation is duly organized and in good standing under the laws of the State of Florida. I further certify that the corporation has paid the required annual report fee, and that my signature shall have the same legal effect as if made on the report of the corporation. I am a resident of the State of Florida, and I am qualified to execute this report as required by Chapter 607, Florida Statutes, and that my name appears on the list of officers and directors of the corporation.

SIGNATURE: ✓

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED AGENT

2-28-95 304426/1111