2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

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Apr 28, 2017
Secretary of State
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Entity Name: HIGHWINDS NL, LLC

Current Principal Place of Business:

807 W. MORSE BLVD.
SUITE 101
WINTER PARK, FL 32789

Current Mailing Address:

807 W. MORSE BLVD.
SUITE 101
WINTER PARK, FL 32789 US

FEI Number: 61-1731021

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MILLER, THOMAS S
807 W. MORSE BLVD.
SUITE 101
WINTER PARK, FL 32789 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:

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	AMBR
Name	HIGHWINDS CAPITAL, INC.
Address	807 W. MORSE BLVD., SUITE 101
City-State-Zip:	WINTER PARK FL 32789

Title	CEO
Name	MILLER, THOMAS S
Address	807 W. MORSE BLVD. SUITE 101
City-State-Zip:	WINTER PARK FL 32789

Title	CFO
Name	MILLER, R GABE CFO
Address	807 W. MORSE BLVD. SUITE 101
City-State-Zip:	WINTER PARK FL 32789

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: R GABE MILLER CFO 04/28/2017

Electronic Signature of Signing Authorized Person(s) Detail — Date