

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000153743

Entity Name: N.I. 1, LLC

Current Principal Place of Business:

4822 BLOSSOM DRIVE
HOLIDAY, FL 34690

Current Mailing Address:

P.O. BOX 3998
HOLIDAY, FL 34692 US

FEI Number: 83-1014543

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NAPOLITANO, ROBERT
4822 BLOSSOM DRIVE
HOLIDAY, FL 34690 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 MGR
Name NAPOLITANO, ROBERT
Address P.O. BOX 3998
City-State-Zip: HOLIDAY FL 34692

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: ROBERT NAPOLITANO

MGR

06/22/2020

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date