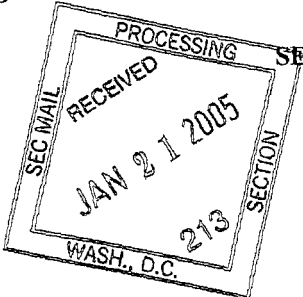


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UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

PROCESSED JAN 27 2005

OMB APPROVAL form with fields for OMB Number, Date, Estimated average burden, and DATE RECEIVED.

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

THOMSON FINANCIAL SEC USE ONLY form with fields for Prefix, Serial, and DATE RECEIVED.

Name of Offering (NL SC Holdings, LLC - Offering of Membership Interests) and Filing Under (Type of Filing: [X] New Filing).

A. BASIC IDENTIFICATION DATA

1. Enter the information requested about the issuer. Name of Issuer (NL SC Holdings, LLC), Address of Executive Offices, and Address of Principal Business Operations.



Brief Description of Business (Acquisition, ownership, operation and maintenance of certain improved real property located in Roswell, GA) and Type of Business Organization.

GENERAL INSTRUCTIONS

Federal: Who Must File, When To File, Where to File, Copies Required, Information Required, Filing Fee.

State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.



**B. INFORMATION ABOUT OFFERING**

- |   |   |
|---|---|
| 1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?<br>Answer also in Appendix, Column 2, if filing under ULOE.  | Yes No<br><input type="checkbox"/> <input checked="" type="checkbox"/>  |
| 2. What is the minimum investment that will be accepted from any individual?  | \$ <u>25,000*</u>   |
|   | *Minimum investment amount may be waived in the discretion of the Manager<br>Yes No<br><input checked="" type="checkbox"/> <input type="checkbox"/> |
| 3. Does the offering permit joint ownership of a single unit?   | <input checked="" type="checkbox"/> <input type="checkbox"/>  |
| 4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. |   |

Full Name (Last name first, if individual)

**Ifshin Adam**

Business or Residence Address (Number and Street, City, State, Zip Code)

**580 White Plains Road, Tarrytown, NY 10591**

Name of Associated Broker or Dealer

**DLC Investment Securities Corp.**

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers

(Check "All States" or check individual States) .....  All States

[AL]	[AK]	[AZ]	[AR]	[*CA]	[CO]	[*CT]	[DE]	[*DC]	[*FL]	[*GA]	[HI]	[ID]
[*IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[*MD]	[*MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[*NJ]	[NM]	[*NY]	[NC]	[ND]	[*OH]	[OK]	[OR]	[*PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[*VA]	[WA]	[WV]	[WI]	[WY]	[PR]

Full Name (Last name first, if individual)

**Wigser Jonathan**

Business or Residence Address (Number and Street, City, State, Zip Code)

**580 White Plains Road, Tarrytown, NY 10591**

Name of Associated Broker or Dealer

**DLC Investment Securities Corp.**

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers

(Check "All States" or check individual States) .....  All States

[AL]	[AK]	[AZ]	[AR]	[*CA]	[CO]	[*CT]	[DE]	[*DC]	[*FL]	[*GA]	[HI]	[ID]
[*IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[*MD]	[*MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[*NJ]	[NM]	[*NY]	[NC]	[ND]	[*OH]	[OK]	[OR]	[*PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[*VA]	[WA]	[WV]	[WI]	[WY]	[PR]

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

Name of Associated Broker or Dealer

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers

(Check "All States" or check individual States) .....  All States

[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

**C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS**

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box  and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.

Type of Security	Aggregate Offering Price	Amount Already Sold
Debt - .....	\$ _____	\$ _____
Equity.....	\$ _____	\$ _____
<input type="checkbox"/> Common <input type="checkbox"/> Preferred		
Convertible Securities (including warrants) .....	\$ _____	\$ _____
Partnership Interests.....	\$ _____	\$ _____
Other (specify) <b>Limited Liability Membership Interests</b> .....	\$ <u>5,000,000</u>	\$ <u>1,000,000</u>
 Total.....	 \$ <u>5,000,000</u>	 \$ <u>1,000,000</u>

Answer also in Appendix, Column 3, if filing Under ULOE

2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."

	Number Investors	Aggregate Dollar Amount of Purchases
Accredited Investors .....	<u>15</u>	\$ <u>1,000,000</u>
Non-accredited Investors .....	<u>-0-</u>	\$ <u>-0-</u>
 Total (for filings Under Rule 504 Only) .....	 <u>N/A</u>	 \$ <u>N/A</u>

Answer also in Appendix, Column 4 if filing under ULOE

3. If this filing is for an offering Under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.

Type of offering	Type of Security	Dollar Amount Sold
Rule 505.....	<u>N/A</u>	\$ <u>-0-</u>
Regulation A.....	<u>N/A</u>	\$ <u>-0-</u>
Rule 504.....	<u>N/A</u>	\$ <u>-0-</u>
 Total.....	 <u>N/A</u>	 \$ <u>-0-</u>

4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.

Transfer Agent's Fees.....	<input type="checkbox"/>	\$ <u>-0-</u>
Printing and Engraving Costs .....	<input checked="" type="checkbox"/>	\$ <u>4,000</u>
Legal Fees.....	<input checked="" type="checkbox"/>	\$ <u>10,000</u>
Accounting Fees .....	<input type="checkbox"/>	\$ <u>-0-</u>
Engineering Fees .....	<input type="checkbox"/>	\$ <u>-0-</u>
Sales Commissions (Specify finder's fees separately) .....	<input checked="" type="checkbox"/>	\$ <u>100,000</u>
Other Expenses (identify): <b>Postage and Delivery of Offering Memoranda and LLC Agreements</b> .....	<input checked="" type="checkbox"/>	\$ <u>2,500</u>
Total.....	<input checked="" type="checkbox"/>	\$ <u>116,500</u>

**C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS**

b. Enter the difference between the aggregate offering price given in response to Part C – Question 1 and total expenses furnished in response to Part C – Question 4.a. This difference is the “adjusted gross proceeds to the issuer.” .....


\$ 4,883,500

5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C – Question 4.b above.

	Payments to Officers, Directors, & Affiliates	Payments To Others
Salaries and fees..... [ ]	\$ <u>-0-</u> [ ]	\$ <u>-0-</u>
Purchase of real estate..... [ ]	\$ <u>-0-</u> [X]	\$ <u>4,630,000</u>
Purchase, rental or leasing and installment of machinery and equipment..... [ ]	\$ <u>-0-</u> [ ]	\$ <u>-0-</u>
Construction or leasing of plant buildings and facilities..... [ ]	\$ <u>-0-</u> [ ]	\$ <u>-0-</u>
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets of securities of another issuer pursuant to a merger)..... [ ]	\$ <u>-0-</u> [ ]	\$ <u>-0-</u>
Repayment of indebtedness..... [ ]	\$ <u>-0-</u> [ ]	\$ <u>-0-</u>
Working capital..... [ ]	\$ <u>-0-</u> [X]	\$ <u>45,500</u>
Other: <b>Real Estate Closing Costs</b> ..... [ ]	\$ <u>-0-</u> [X]	\$ <u>208,000</u>
Column totals..... [ ]	\$ <u>-0-</u> [X]	\$ <u>4,883,500</u>
Total payments listed (column totals added) .....	[X] \$	<u>4,883,500</u>

**D. FEDERAL SIGNATURE**

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type) <b>NL SC Holdings, LLC</b>	Signature 	Date <b>January 9, 2005</b>
Name of Signer (Print or Type) <b>First Man Northern Lights Corp., its Manager By: Adam Ifshin</b>	Title of Signer (Print or Type) <b>President of the Manager</b>	

**Attention**

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)