DOCUMENT # P0000065718  1. Entity Name													
A & M UNLIMITED INVESTMENTS, INC.						FILED  SECRETARY OF STATE  DIVISION OF CORPORATIONS							
Principal Place 9358 KETAY CIR BOCA RATON F	RCLE	Mailing Address 9358 KETAY CIRCLE BOCA RATON FL 33428				01 JAN 10 PM 2: 26							
2. Principal Pl	ace of Business	3. Mailing Address											
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE							
City & State		City & State				4. FEI N	umber					plied For t Applicable	e
Zip	Country	Zip	Country			5. Certificate of Status Desired \$8.75 Addition Fee Required							
	6. Name and Address of Current R	egistered Agent		N	· · · · · ·	7. Name	and Addre	ss of Nev	Register	ed Agent			
PDOV	NN, JAMES E JR			Name									
BROV	WN, JAMES E JN WN & BROWN WEST ATLANTIC BLVD STE 100-A			Street A	ddress (P.0	.O. Box N	umber is No	t Accepta	ble)				
	PANO BEACH FL 33069			City					F	Zi Zi	p Code	·	$\dashv$
9 The above	named entity submits this statement for	the purpose of changing its	registere	d office or	renistered	d agent (	or both in th	e State of					$\dashv$
9. This corpo	Signature, typed or printed name of registered agent an action is eligible to satisfy its Intangible	FILE NOW!	!! FEE	IS \$150.		==-	ng)	Campaign	DAT Financing		\$5 O	<b>D</b> May Be	-
(See criteri	equirement and elects to do so.	After MAY 1, 20 Make Check Payat	le to De			,	Trust Fun	d Cantribu	tion.		Added	to Fees	
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TITLE	BOCA RATON FL 33428	Delete	TITLE		BOC	a K	4 TO17	, –	<u> </u>			☐ Additio	
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STREET ADDRESS CITY-ST-ZIP				ET ADDRESS ST-ZIP									
13. I hereby c	tertify that the information supplied with to on this report or supplemental report is to poration or the receiver or trustee emporor or on an attachment with an adverses.	zue and accurate and that r	r the exer	nption stat	ave the sa	ame Jegai	effect as if I	made undi	er oath: tha	it I am an	officer -	or director	:
SIGNAT	URE:	INTED NAME OF SIGNING OFFICER						5/0s		Daytime P			-