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Secretary of State

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So NW 33RD AVE SUITE 219 FORT LAUDERDALE FL 33309 82 Siront Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Lip Code 11. Pursuant to the provisions of Sections 607.0502 and 607 1508. Florids Statutes, the above-named corporation submits this statement for the purpose of changing lis registered agent. I am femilier with, not decept the obligations of, Sections 607 5056, Florids, Such change was authorized by the corporation's board of directors. I horeby accept the appointment as registered agent. I am femilier with, not decept the obligations of, Sections 607 5056, Florids Statutes. SIGNATURE Signams synd or printed name of registered agent act life it reminists. SIGNATURE PTSD OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE BARBER, KENNETH T STREET ADDRESS ONY-51-2P 13. STREET ADDRESS ONY-51-2P 13. STREET ADDRESS ONY-51-2P 14. TITLE DELETE 21. TITLE DELETE 21. TITLE DELETE 31. TITLE Change Addition Change Addition A		9. Name and Address of Cu				
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