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	6. Name a	and Address of Current	Registered Agent	- Name	7. N	lame and Address of New Regis	stered Agen	it	
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				City	iami	· <u></u>	FL	Zip Code	30
The oboug	named antibut	outhwite this statement for	or the purpose of changing it	ts registered office or	registered ag	ent, or both, in the State of Florida		<u> </u>	<u> </u>
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SNATURE _			AND Assets the AND	TE. Registered Agent signat	ure required when re	sinetating)	DATE		
	Signature, typed or	printed name of registered agent		TE. Registered Agent signal	ure required wher re	mistaturg)			
	ration is eligible	le to satisfy its Intangible		10 4450		1			
Tax filing re	_			/!!! FEE IS \$150. 2001 Fee will be \$5		10. Election Campaign Financ			May Be
•	_	nd elects to do so.	After MAY 1, 2	V!!! FEE IS \$150. 2001 Fee will be \$5 able to Departmen	550.00 t of State	Trust Fund Contribution.		Ådded t	to Fees
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