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rincipal Plac	ce of Business	Mailing Address						
198 FULLERTON ST		P.O BOX 269						
.DG 600 CKSONVILLE FL 32256		san antonio tx 78291 Us			00033644			
Principal P	Place of Business	3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE			
		01-101-1			El Number - FO 47000F7	Ar	plied For	
City & State		City & State		4. 1	4. FEI Number 59-1769957		Not Applicable	
Zip	Country	Zip	Country	5. (Certificate of Status Desired	\$8.75 Add Fee Require		
	6. Name and Address of Curren	t Registered Agent		7. 1	ame and Address of New Registe			
			Name_	ب ر سند من م	الم الله المحدود الممم المحمور الإ	م السالية		
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD		Street		ddress (P.O. E	ress (P.O. Box Number is Not Acceptable)			
	NTATION FL 33324						·	
			City		· · · · · · · · · · · · · · · · · · ·	FL Zip Cod	e	
	e named entity submits this statement f							
GNATURE .	Signature, typed or printed name of registered agen	nt and title if applicable. (NO	TE: Registered Agent signa	ure required when re	instating) C	DATE		
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