1997 Devision of CORPORATIONS Seccretary of State OCUMENT # 654839 (0) W.C. MILLER & ASSOCIATES, INC. Image: Address Set and movel Sec at 20 m movel Address & Corport Sec at 20 m movel Set at 20 m movel Sec at 20 m movel Address & Corport Sec at	1997 Devision or componentions Secretary of State OCUMENT # 654839 (0) W.C. MILLER & ASSOCIATES, INC. Image: Componention of the componention of th	COR	Profit Poration Jal Report		Sandra i	RTMENT OF STATE 3. Mortham	May 07		
W.C. MILLER & ASSOCIATES, INC. Object Flue to Of Relations: BS & LTON ARENE BS & LTON ARENE ARE	W.C. MILLER & ASSOCIATES, INC. Diand The coll basic costs Dear The coll basic costs <th></th> <th></th> <th></th> <th></th> <th>•</th> <th>Secret</th> <th>tary of</th> <th>f State</th>					•	Secret	tary of	f State
	And Prove of Boars os. Maing Address				(0)				
Apple of Distances Apple of Distance	Part of Audition Status be been been been been been been been			• • •					
Op/OH/1980 OS/01/1986 Variable Huur of Business 26. Variable Huur of Business 28.	C2/A4/1880 C5/01/1998 trictual Factor of Discretes 2a Maling Address 4. FEI Number Applied Factor of Applied Factor 127 5 State. Apl. etc. 5. Certificatio of Status Depind 58.75 Additional 27 5 State. 27 Country 6. Certificatio of Status Depind 7. 37 5 State. 27 Country 7. Country 7. State Control Address of New Pagilitation Applied Factor 37 5 State. 27 Country 7. Country File Election Campaign and Address of New Pagilitation Applied 30 Name and Address of Current Registered Applied 91 Name and Address of New Pagilitation Applied State Applied 30 Notes and Address of Current Registered Applied 91 Name and Address of New Pagilitation Applied State Applied Factor 30 Notes and Address of Current Registered Applied 91 Name and Address of New Pagilitation Applied State Applied Factor 30 Notes and Address of Current Registered Applied 91 Name State Applied Factor 30 Notes and Address of Current Registered Applied 91 Name State Applied Factor 30 Notes and Address of Current Registered Applied 91 </th <th>5-3 ALTON D. BOX 279 XSONVILL</th> <th>i avenue N</th> <th>86) 7.0 JA</th> <th>25-3 ALTON AVENUE D. BOX 2704 CKSONVILLE FL 3221</th> <th>1-9600</th> <th></th> <th></th> <th></th>	5-3 ALTON D. BOX 279 XSONVILL	i avenue N	86) 7.0 JA	25-3 ALTON AVENUE D. BOX 2704 CKSONVILLE FL 3221	1-9600			
Set Specification Specification Specification and constraints 201 State Control States Desired States Desired and constraints Country 2 Country 8. Control States Desired States Desired and constraints Country 2 Country 8. Control States Desired States Desired and constraints Country 2 Country 8. This corporation has beaking for analysis and does a 169 032, indiced to Research and does and constraint and and does and constraint and does and	Source 70 50 50 50 50 avg & State City & State City & State						02/04/1980		1996
City & State City & Country Za Country Za Country Za Country Za Country Za Country Za Country Replaced The Encounted Added to Page No None and Address of Country Country Replaced The Country Country Replaced The Country Country Replaced The Country The Country Replaced The Country Replaced The Country Replaced The Country The Country	Product of the provision of the control of the co	micipal Pi	ace of Business		Malling Address				Applied For Not Applicable
Chy & State Chy & State Event & State True Fund Contribution Added to Fees Yet Zip Zip Country In the comportation has beautifue to integrite the second of the s	Chy & State Chy &	suite, Apt -	#, etc.	1	Suite, Apt. #, etc.		5. Certificate of Status Desired		
Print Country Zip Country B. This corporation has liability for Hangible tax under a 199 032. Print destinates Print destination Print destinatin a state destinatin a state destinatin a state destination	Country Zip Country B. This corporation has kability for intengible lax under s. 199 032, Plonds Statules Inser and Address of Current Registered Agent HOLBROOK, H. LEON 280 10 Ford Statules Incer Ince	Dity & State	0 .		City & State				5.00 May Be
Se Name and Address of Current Registered Agent HOLBROOK, H LEON 201 INDEPENDENT SOLUARE ONE INDEPENDENT SOLUARE ONE INDEPENDENT SOLUARE ONE INDEPENDENT SOLUARE ONE INDEPENDENT OPINE JACKSONMILLE FL 32202 Street Address (P.O. Box Number is Not Acceptable) Solution Solutin Solution Solutin Solution Solutin Solution	B. Name and Address of Current Registered Agent HOLBROOK, H. LEON 2001 INDEPENDENT SOUARE ONE INDEPENDENT ORIVE JACKSONVILLE FL S2202 Extend for the source of the above named corporation submits this statement for the prevale of changing its registered agent fain functions with, and acceptable it exclusions of Scetch of SOC 505. Finish Statewes. NATURE Determine with, and acceptable it exclusions of Scetch of SOC 505. Finish Statewes. NATURE Determine with, and acceptable it exclusions of Scetch of SOC 505. Finish Statewes. NATURE Determine with, and acceptable it exclusions of Scetch of SOC 505. Finish Statewes. NATURE Determine with, and acceptable it exclusions of Scetch of SOC 505. Finish Statewes. NATURE Determine with, and acceptable it exclusions of Scetch of SOC 505. Finish Statewes. NATURE Determine with, and acceptable it exclusions of Scetch of SOC 505. Finish Statewes. NATURE Determine with and acceptable it exclusions of Scetch of SOC 505. Finish Statewes. NATURE Determine with and acceptable it exclusions of Scetch of SOC 505. Finish Statewes. NATURE Determine with and acceptable it exclusions of Scetch of SOC 505. Finish Statewes. Determine with and acceptable it exclusions of Scetch of SOC 505. Finish Statewes. Determine with exclusions of Scetch of SOC 505. Finish Statewes. Determine with and acceptable it exclusions of Scetch of SOC 505. Finish Statewes. Determine with and acceptable it exclusions of Scetch of SOC 505. Finish Statewes. Determine with and acceptable it exclusions of Scetch of SOC 505. Finish Statewes. Determine with and acceptable it exclusions of Scetch of SOC 505. Finish Statewes. Determine with and acceptable it exclusions of Scetch of SOC 505. Finish Statewes. Determine with and accep	Zip	Count		Zip	Country			
HOLBROOK, H LEON 2001 INDEPENDENT SOUARE ONE INDEPENDENT SOUARE ONE INDEPENDENT DAVE JACKSONMILLE FL 32202 Furnation to the increase of Sections 607 0502 and 607 1508. Florida Statutes, the above-memory corporation submits this statement for the purpose of changing its registere agent: I an bunker with, and accept the obligations of, Section 607 0505. Florida Statutes, the above-memory corporation submits this statement for the purpose of changing its registere agent: I an bunker with, and accept the obligations of, Section 607 0505. Florida Statutes, the above-memory corporation submits this statement for the purpose of changing its registere agent: I an bunker with, and accept the obligations of, Section 607 0505. Florida Statutes, and accept the obligations of, Section 607 0505. Florida Statutes, and accept the obligations of, Section 607 0505. Florida Statutes, and accept the obligations of, Section 607 0505. Florida Statutes, and accept the obligations of, Section 607 0505. Florida Statutes, and accept the obligations of, Section 607 0505. Florida Statutes, and accept the obligations of, Section 607 0505. Florida Statutes, and accept the obligations of, Section 607 0505. Florida Statutes, and accept the obligations of, Section 607 0505. Florida Statutes, and accept the obligations of, Section 607 0505. Florida Statutes, and accept the obligations of, Section 607 0505. Florida Statutes, and accept the obligations of, Section 607 0505. Florida Statutes, and accept the obligations of, Section 607 0505. Florida Statutes, and accept the obligation of, Section 607 0505. Florida Statutes, and accept the obligation of, Section 607 0505. Florida Statutes, and accept the obligation of, Section 607 0505. Florida Statutes, and accept the obligation of, Section 607 0505. Florida Statutes, and the section florida Statutes, and accept the obligation of, Section 607 0505. The accept the obligation of, Section 607 0505. Florida Statutes, and accept the obligation of, Section 607 0505. The accept the accept the accept the	HOLBROOK, H LEON 2001 INDEPENDENT SOUARE ONE INDEPENDENT SOUARE ONE INDEPENDENT SOUARE ONE INDEPENDENT SOUARE ONE INDEPENDENT DAVE JACKSONVILLE FL 32202 Function to link in revelations 407 Socialis 507 D502 and 607 1508. Florida Statutes. The above named corporation submits this statement for the purpose of changing its registrate def City Function to link increased agend, or hold, the State of Torida Sub-therape was authorized by the compression submits this statement for the purpose of changing its registrate degree. I can familiar with, and accept the obligations of. Social 607 0505. Florida Statutes. NAI Uff Increase State performent the rapicate PD CFFICERS AND DIFECTORS DELETE Intre PD CFFICERS AND DIFECTORS DELETE Intre PD D CFFICERS DELETE Intre PD D D D D D D D D D D D D D D D D D D					30	Florida Statutes	Yes No	D
ONE INDEPENDENT DRIVE JACKSONMILLE FL 32202	ONE INDEPENDENT DRIVE JACKSONMILE FL 32202	HO				81 Name			
JACKSONNILE FL S2202	JACKSONMILE FL S2202 Solution	230	1 INDEPENDENT S			82 Street Add	dress (P.O. Box Number is Not Accep	table)	
Pd City FL 85 Zip Code Fursuant to the provisions of Sections 607 0502 and 607 1506. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. an identification of, Section 607 0505. Florida Statutes, the above-named corporation's board of directors. I hereby accept the supporting of the support agent and index of florida. Such change was authorized by the corporation's board of directors. I hereby accept the support agent and index of florida. Statutes, and a statutes. NAT UFF Interv spector prior theorement of the tagenable. (interview) accept the support agent and index of the origination of sectors. I hereby accept the support agent and interview. (interview) accept the support agent and interview. (interview) accept the support agent and interview. (interview) accept the support agent agent and interview. (interview) accept the support agent agent and interview. (interview) accept the support agent	Parameter to the provisions of Socions 607 0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the support as strepts are directors and of directors. I hereby accept the support as the strepts accept the support and statutes. NA1 UFF Director agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the support as the support of the					83	· · · · · · · · · · · · · · · · · · ·		
Pursuant to the provisions of Socions 607 0502 and 607 1508. Florida Statutes, the above-named corporation suboilts this statement for the purses of changing its registered agent, or both, in the Soate of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 607 0505. Florida Statutes. NAI UPE NAI UPE December 2016 or raise of registering agent and the inspectate (OOE Registered Agent signifure register dates mentaling) DATE OFFICERS AND DIRECTORS INTER DELETE INTRE OFFICERS AND DIRECTORS IN 12 OFFICERS AND AVE, POB 2794 3350REF1ADORSS S7 /20 OFFICERS AND AVE, POB 2794 3250REF1ADORSS S7 /20 OFFICERS S1	Pursuant to the precisions of 26c1 0502 and 607.1508 Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and built with, and accept the State of Florida Statutes. The above-named corporation's board of directors. Thereby accept the appointment as registered agent, and accept the builtgations of, Section 607, 505, Florida Statutes. The above-named corporation's board of directors. Thereby accept the appointment as registered agent, and accept the builtgations of, Section 607, 505, Florida Statutes. The above-named corporation's board of directors. Thereby accept the appointment as registered agent, and accept the builtgations of, Section 607, 505, 600, 600, 600, 600, 600, 600, 600								
NATURE Data accorport or prive randomination digent and the corporative (NOTE Projective marked when releasing) Date CFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 PO DELETE 11 ITLE Date VIE Projective prive randomination of the corporation of the	NA1 UEB Operators protocome of segment and sequenced agent and sequence insolved when remaining) DATE OFFICE RG AND DIRE CTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Image: Segment and sequence insolved agent and sequence insolved when remaining) Date Change Addite Image: Segment and sequence insolved agent and sequence insolved agent agent and sequence insolved agent and sequence insolved agent agent and sequence insolved agent agent agent agent and sequence insolved agent		MOUNVILLE FL 322	:V2		B4 City	**************************************	85	Zip Code
NATURE Data accorport or prive randomination digent and the corporative (NOTE Projective marked when releasing) Date CFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 PO DELETE 11 ITLE Date VIE Projective prive randomination of the corporation of the	NA1 UEB Operators protocome of segment and sequenced agent and sequence insolved when remaining) DATE OFFICE RG AND DIRE CTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Image: Segment and sequence insolved agent and sequence insolved when remaining) Date Change Addite Image: Segment and sequence insolved agent and sequence insolved agent agent and sequence insolved agent and sequence insolved agent agent and sequence insolved agent agent agent agent and sequence insolved agent				7 1508 Elocido Statu		reaction a britte this statement for th	FL	
OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 PD DELETE 11 TITLE Change Addition ACORESS JACKSONVILLE FL 12 RAME 12 RAME JACKSONVILLE FL 10 ELETE 13 STREET ADDRESS 14 Addition MILLER, LINDA DELETE 21 TITLE Change 14 Addition MILLER, LINDA DELETE 21 TITLE Change 14 Addition MILLER, LINDA DELETE 21 TITLE Change 14 Addition MILLER, LINDA 22 STALET ADDRESS 24 CITY-ST-ZP 14 Change 14 Addition Str. 7.P DELETE 31 TITLE 23 CITACET ADDRESS 33 STREET ADDRESS 33 STREET ADDRESS Str. 7.P DELETE 31 TITLE 24 CITY-ST-ZP 14 Change Addition Str. 7.P DELETE 31 TITLE 24 CITY-ST-ZP 14 Change Addition Str. 7.P DELETE 31 TITLE 14 Change 14 Addition 14 Change 14 Addition Str. 7.P DELETE Str. 7.P 10 ELETE 53 STREET ADDRESS 34 CITY-ST-ZP 14 Change 14 A	OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 PD D BLETE 11 TITLE Change Addite SE ADORESS 6825 ALTON AVE, POB 2794 13 STREET ADDRESS Addite Addite SE ADORESS 13 STREET ADDRESS 14 GTY-S1-2P D Change Addite SE ALTON AVE, POB 2794 10 DELETE 21 TITLE 14 GTY-S1-2P D Change Addite PALARESS 35 TAU 10 DELETE 21 TITLE 14 GTY-S1-2P D Change Addite PALARESS 35 STREET ADDRESS 22 NAME 23 STREET ADDRESS 35 STREET ADDRESS 35 STREET ADDRESS 35 STREET ADDRESS 34 GTY-S1-2P 35 STREET ADDRESS 34 GTY-S1-2P 35 STREET ADDRESS 35 STR				7,1508, Florida Statu a Such change was Section 607 (505) Fl		rporation submits this statement for the ation's board of directors. I hereby acc	FL	
MILLER, W.C. 12 AMAE SI ADDRESS 8825 ALTON AVE, POB 2794 13 STREET ADDRESS JACKSONVALLE FL 14 QTY-SI-2P D DELETE 21 TITLE MILLER, LINDA 0E25 ALTON AVE, POB 2794 28 STREET ADDRESS SI ADDRESS 22 MARE 9625 ALTON AVE, POB 2794 28 STREET ADDRESS SI ADRESS 23 MARE SI ADRESS 33 STREET ADDRESS SI ADRESS SI STREET ADDRESS SI ADRESS	MILLER, W.C. 12 NAME B825 ALTON AVE, POB 2794 13 STRET ADDRESS S1 /ui JACKSONVILLE FL D DELETE 21 MULER, LINDA DELETE 8625 ALTON AVE, POB 2794 23 STRET ADDRESS 9625 ALTON AVE, POB 2794 23 STRET ADDRESS 9626 ALTON AVE, POB 2794 23 STRET ADDRESS 9627 ALTON AVE, POB 2794 23 STRET ADDRESS 9627 ALTON AVE, POB 2794 23 STRET ADDRESS 9628 ALTON AVE, POB 2794 23 STRET ADDRESS 9627 ALTON AVE, POB 2794 23 STRET ADDRESS 9628 ALTON AVE, POB 2794 23 STRET ADDRESS 9628 ALTON AVE, POB 2794 33 STRET ADDRESS 9629 ALTON AVE, POB 2794 42 DIY-ST-2P 963 STRET ADDRESS 44 DIY-ST-2P 964 ADTY-ST-2P 24 ADTY-ST-2P 97 ADDELETE 51 TITLE 97 ADDELETE 51 TITLE 97 ADDELETE 51 TITLE	Pursuant 1 office or n agent. Lar NATURE	to the provisions of Sec egistered agent, or bot m familiar with, and ac	ctions 607 0502 and 60 h, in the State of Floridt cept the obligations of,		les, the above-named co authorized by the corport orida Statutes.		FL e purpose of cha cept the appointn	
Statutoress 8625 ALTON AVE, POB 2794 13.Street ADDRESS Street ADDRESS 14.GITY-ST-ZP D OELETE 21.Title MILLER, LINDA 22.NAME 9625 ALTON AVE, POB 2794 23.Street ADDRESS 57.7P JACKSONVILLE FL 21.Title JACKSONVILLE FL 22.NAME 9625 ALTON AVE, POB 2794 23.Street ADDRESS 57.7P JACKSONVILLE FL 24.DITY-ST-ZP DELETE 31.Title Othange 9625 ALTON AVE, POB 2794 23.Street ADDRESS Additio 57.7P JACKSONVILLE FL 24.DITY-ST-ZP Street ADDRESS 33.Street ADDRESS Additio 51.7P 34.CITY-ST-ZP Change Additio 61.000000000000000000000000000000000000	8625 ALTON AVE, POB 2794 13 STREET ADDRESS SP. 2# JACKSONVALE FL 14 DTY-SI-2# D DELETE 2 NAME 625 ALTON AVE, POB 2794 35 7.7# ACKSONVALE FL 2 NAME 625 ALTON AVE, POB 2794 35 STREET ADDRESS JACKSONVALE FL 24 DITY-SI-2# ACKSONVALE FL 24 DITY-SI-2# JACKSONVALE FL 24 DITY-SI-2# JACKSONVALE FL 24 DITY-SI-2# JACKSONVALE FL 24 DITY-SI-2# JACKSONVALE FL 24 DITY-SI-2# 24 DITY-SI-2# 33 STREET ADDRESS SI-7# DELETE 31 TITLE 34 DITY-SI-2# 24 DITY-SI-2# 24 DITY-SI-2# 24 DITY-SI-2# 24 DITY-SI-2# 251 J# DELETE 41 TITLE 42 DIAME 53 STREET ADDRESS 54 DITY-SI-2# 24 DITY-SI-2# 251 J# DELETE 51	Pursuant 1 office or n agent. Lar NATURE	to the provisions of Sec egistered agent, or bot m familiar with, and ac	ctions 607 0502 and 60 h, in the State of Florida copt the obligations of, er of repolered agent and tile (applicable (NO	les, the above-named co authorized by the corport orida Statutes.	uired when reinstating)	E purpose of cha cept the appointm DATE	nging its registered nent as registered
S1 24 JACKSONVILLE FL 14 GITV-S1-24P D D DELETE 21 TITLE V ACLAGESS 3625 ALTON AVE, POB 2794 23 STREET ADDRESS S1 24 JACKSONVILLE FL 21 TITLE S1 24 JACKSONVILLE FL 24 DITY-S1-24P S1 27P JACKSONVILLE FL 21 TITLE S1 27P JACKSONVILLE FL 24 DITY-S1-24P S1 200 DELETE 31 TITLE S1 200 DELETE 31 TITLE S1 200 33 STREET ADDRESS 33 STREET ADDRESS S1 200 DELETE 31 TITLE S1 200 DELETE 34 CITY-S1-24P C1 ADDRESS 43 STREET ADDRESS S1 200 44 CITY-S1-24P S1 200 DELETE S1 200 24 CITY-S1-24P S1 200 25 NAME S1 200 S1 TITLE S1 200 S1 TITLE S2 NAME S3 STREET ADDRESS S2 NAME S3 STR	S1 24 JACKSONVILLE FL 14 GIY-S1-ZP D DELETE 21 TITLE MILLER, LINDA 23 SIRET ADDRESS 9625 ALTON AVE, POB 2794 23 SIRET ADDRESS 151 7P JACKSONVILLE FL DELETE 31 TITLE DELETE 31 TITLE S17 7P JACKSONVILLE FL DELETE 31 TITLE S17 7P Change Addition 24 DIY-S1-ZIP JACKSONVILLE FL Change Addition 24 DIY-S1-ZIP JACKSONVILLE FL DELETE 31 TITLE Change JACKSONVILLE FL Addition S17 7P JACKSONVILLE FL DELETE 31 TITLE S17 7P JACKSONVILLE FL DELETE 33 SIREET ADDRESS S17 7P JACKAR GELETE 41 TITLE S17 7P GELETE GELETE 51 TITLE S17 7P Change JACKING S3 SIREET ADDRESS S17 7P S3 SIREET ADDRESS S17 7P S3 SIREET ADDRESS S17 7P <td>Pursuant 1 office or n agent. Lar NATURE</td> <td>to the provisions of Sec egistered agent, or bot m familiar with, and ac signater, igned or perfect ran (PD</td> <td>ctions 607 0502 and 60 h, in the State of Florida copt the obligations of, er of repolered agent and tile (</td> <td>applicable (NO TORS</td> <td>les, the above-named co authorized by the corpora orida Statutes. E: Registered Agent signature req 13. 1.1 TITLE</td> <td>uired when reinstating)</td> <td>DATE FICERS AND DIR</td> <td>nging its registered nent as registered ECTORS IN 12</td>	Pursuant 1 office or n agent. Lar NATURE	to the provisions of Sec egistered agent, or bot m familiar with, and ac signater, igned or perfect ran (PD	ctions 607 0502 and 60 h, in the State of Florida copt the obligations of, er of repolered agent and tile (applicable (NO TORS	les, the above-named co authorized by the corpora orida Statutes. E: Registered Agent signature req 13. 1.1 TITLE	uired when reinstating)	DATE FICERS AND DIR	nging its registered nent as registered ECTORS IN 12
H MILLER, LINDA 22 NAME B625 ALTON AVE, POB 2794 23 STREET ADDRESS JACKSONVILLE FL 2 d CIY-ST-ZIP DELETE 31 TITLE 32 NAME 33 STREET ADDRESS S51-7/P 34 CITY-ST-ZIP DELETE 31 TITLE 33 STREET ADDRESS 33 STREET ADDRESS S151-7/P 34 CITY-ST-ZIP DELETE 41 TITLE ADDRLSS	H MILLER, LINDA 22 NAME B625 ALTON AVE, POB 2794 23 STREET ADDRESS 157.7P JACKSONVILLE FL 24 CIY-ST-2IP 10ELETE 31 TITLE 1 Change Addition 157.7P JACKSONVILLE FL 24 CIY-ST-2IP 1 Addition 157.7P 1 DELETE 31 TITLE 1 Change 1 Addition 151.7P 33 STREET ADDRESS 33 STREET ADDRESS 1 Addition 151.7P 34 CIY-ST-2IP 1 Change 1 Addition 164 1 DELETE 41 TITLE 1 Change 1 Addition 174 1 DELETE 41 TITLE 1 Change 1 Addition 184 1 DELETE 41 TITLE 1 Change 1 Addition 194 1 DELETE 41 TITLE 1 Change 1 Addition 194 1 DELETE 51 TITLE 1 Change 1 Addition 194 1 DELETE 51 TITLE 1 Change 1 Addition 194 1 DELETE 51 TITLE 1 Change 1 Addition 194 1 DELETE 51 TITLE 1 Change 1 Addition 194	Pursuant 1 office or n agent, I ar NATURE	to the provisions of Sec ogistered agent, or bot in familiar with, and ac Signature light or perfect ran O PD MILLER, W.C.	ctions 607 0502 and 60 In, in the State of Florida cept the obligations of, and repsilence agent and title 1 DFFICERS AND DIRECT	applicable (NO TORS	Les, the above-named co authorized by the corport orida Statutes. E. Registered Agent signature req 13. 1.1 TITLE 1.2 NAME	uired when reinstating)	DATE FICERS AND DIR	nging its registered nent as registered ECTORS IN 12
Pricipates 8625 ALTON AVE, POB 2794 2 3 STAEET ADDRESS S7. 2/P DELETE 3 TITLE DELETE 3 TITLE 32 NAME 33 STREET ADDRESS S51. 2/P 33 STREET ADDRESS S51. 2/P 34 CITY- ST-2/P DELETE 34 CITY- ST-2/P DELETE 41 TITLE DELETE 41 TITLE S1. 2/P Change DELETE 41 TITLE S1. 2/P Change DELETE 41 TITLE S1. 2/P Change Addition 4 A CITY- ST-2/P Change Addition S1. 2/P 4 A CITY- ST-2/P Change Addition S1. 2/P 4 A CITY- ST-2/P Change Addition S1. 2/P 5 STREET ADDRESS S1. 2/P S1 STREET ADDRESS S1. 2/P S1 STREET ADDRESS S1. 2/P S1 STREET ADDRESS S2 AMAE S3 STREET ADDRESS S1. 2/P S1 ACLEY S1-2/P DELETE S1 STREET ADDRESS S1. 2/P S1 ACLEY S1-2/P	Principles 8625 ALTON AVE, POB 2794 JACKSONVILLE FL 28 STREET ADDRESS 2.4 CITY-ST-ZIP IST. 7/P IDELETE 3.1 TITLE Integration Addition IF ADDRESS 3.3 STREET ADDRESS 3.3 STREET ADDRESS Integration Addition IST. 7/P IDELETE 3.1 TITLE Integration Integration Integration Integration IST. 7/P IDELETE 4.1 TITLE Integration Int	Pursuant 1 office or n agent. Lar NATURE E	to the provisions of Sec ogistered agent, or bot in familiar with, and ac- Sterator, ignet a parted ran PD MILLER, W.C. 8625 ALTON AVE	ctions 607 0502 and 60 th, in the State of Florida cept the obligations of, are of registered agent and title if OFFICERS AND DIRECT E, POB 2794	applicable (NO TORS	tes, the above-named co authorized by the corport orida Statutes. I. Registered Agent signature req 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	uired when reinstating)	DATE FICERS AND DIR	nging its registered nent as registered IECTORS IN 12
SY. 2/P JACKSONVILLE FL 2.4 DIY-ST-2/P I DELETE 3.1 TITLE I Change Addition 32 NAME 3.3 STREET ADDRESS 3.3 STREET ADDRESS St. 7/P 3.4 CITY-ST-2/P I DELETE 4.1 TITLE I DELETE 4.1 TITLE I Change Addition I ADDRESS 3.3 STREET ADDRESS I DELETE 4.1 TITLE I DELETE 4.1 TITLE I Change Addition I ADDRESS 4.3 STREET ADDRESS I DELETE I DELETE St. 7/P I DELETE 4.1 TITLE I DELETE I DELETE 5.1 TITLE I DELETE I DELETE St. 7/P I DELETE 5.1 TITLE I DELETE St. 7/P I DELETE 5.1 TITLE I DELETE St. 7/P I DELETE 5.1 TITLE I DELETE St. 7/P I DELETE 5.3 STREET ADDRESS I DELETE St. 7/P I DELETE 6.1 TITLE I DELETE St. 7/P I DELETE 6.1 TITLE I DELETE St. 7/P I DELETE 6.1 TITLE I DELETE St. 7/P I DELETE <td>SY-2/P JACKSONVILLE FL 2.4 CITY-ST-2IP DELETE 3.1 TITLE Dhange Addition 32 NAME 32 NAME 33 STREET ADDRESS 33 STREET ADDRESS SI-7/P 34 CITY-ST-2IP Change Addition Change 34 CITY-ST-2IP Change Addition SI-7/P 34 CITY-ST-2IP Change Addition SI-7/P 0 DELETE 41 TITLE Change Addition SI-7/P 35 STREET ADDRESS 44 CITY-ST-2IP Change Addition SI-7/P 0 DELETE 51 TITLE Change Addition SI-7/P 0 DELETE 51 TITLE Change Addition SI-7/P 0 DELETE 51 TITLE Change Addition SI 7/P 0 DELETE 51 TITLE Change Addition SI 7/P 0 DELETE 51 TITLE Change Addition SI 7/P 0 DELETE 63 STREET ADDRESS 0 DELETE 64 CITY-S1-2/P SI 7/P 0 DELETE 64 CITY-S1-2/P 0 DELETE 64 CITY-S1-2/P</td> <td>Pursuant t office or n agent. Lan NA'LURE E ELADORESS SLZI</td> <td>to the provisions of Sec egistered agent, or bot in familiar with, and ac- lite area, ignet or ported rain PD MILLER, W.C. 8625 ALTON AVE JACKSONVILLE F D</td> <td>ctions 607 0502 and 60 th, in the State of Florida cept the obligations of, are of registered agent and title if OFFICERS AND DIRECT E, POB 2794</td> <td>applicable (NO TORS DELETE</td> <td>tes, the above-named co authorized by the corpora orida Statutes. I. Registered Agent signature req 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-SI-ZIP 2.1 TITLE</td> <td>uired when reinstating)</td> <td>PL e purpose of cha cept the appointn DATE FICERS AND DIR</td> <td>nging its registered nent as registered IECTORS IN 12 Change Addition</td>	SY-2/P JACKSONVILLE FL 2.4 CITY-ST-2IP DELETE 3.1 TITLE Dhange Addition 32 NAME 32 NAME 33 STREET ADDRESS 33 STREET ADDRESS SI-7/P 34 CITY-ST-2IP Change Addition Change 34 CITY-ST-2IP Change Addition SI-7/P 34 CITY-ST-2IP Change Addition SI-7/P 0 DELETE 41 TITLE Change Addition SI-7/P 35 STREET ADDRESS 44 CITY-ST-2IP Change Addition SI-7/P 0 DELETE 51 TITLE Change Addition SI-7/P 0 DELETE 51 TITLE Change Addition SI-7/P 0 DELETE 51 TITLE Change Addition SI 7/P 0 DELETE 51 TITLE Change Addition SI 7/P 0 DELETE 51 TITLE Change Addition SI 7/P 0 DELETE 63 STREET ADDRESS 0 DELETE 64 CITY-S1-2/P SI 7/P 0 DELETE 64 CITY-S1-2/P 0 DELETE 64 CITY-S1-2/P	Pursuant t office or n agent. Lan NA'LURE E ELADORESS SLZI	to the provisions of Sec egistered agent, or bot in familiar with, and ac- lite area, ignet or ported rain PD MILLER, W.C. 8625 ALTON AVE JACKSONVILLE F D	ctions 607 0502 and 60 th, in the State of Florida cept the obligations of, are of registered agent and title if OFFICERS AND DIRECT E, POB 2794	applicable (NO TORS DELETE	tes, the above-named co authorized by the corpora orida Statutes. I. Registered Agent signature req 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-SI-ZIP 2.1 TITLE	uired when reinstating)	PL e purpose of cha cept the appointn DATE FICERS AND DIR	nging its registered nent as registered IECTORS IN 12 Change Addition
EFE ADERESS 3.2 NAME S1-7IP 3.3 STREET ADDRESS S1-7IP DELETE A. CITY-ST-ZIP DELETE 4.1 TITLE 4.2 NAME 4.2 NAME S1-7IP DELETE 4.1 TITLE 4.2 NAME S1-7IP DELETE 4.2 NAME S1-7IP Change Addition 4.2 NAME S1-7IP 4.3 STREET ADDRESS -S1-7IP Addition S1 TITLE DELETE S1 TITLE DELETE S1 TITLE S2 NAME S1 TITLE S1 TITLE S1 TITLE S2 NAME S1 TITLE S1 STREET ADDRESS S1 TITLE S1 TITLE S1 STREET ADDRESS S1 STREET ADDRESS S1 TITLE Change Addition S1 TITLE Change Addition S1	Image: Strate Address 32 NAME Strate Address 33 STREET ADDRESS Strate Address 34 CITY-Strate Image: Strate Address Change Image: Strate Address Address Image: Strate Address Strate Address Image: Strat	Pursuant t office or n agent. Lan NA'LURE E ELADORESS SL-ZI	to the provisions of Sec ogistered agent, or bot in familiar with, and ac Stephene, bject or ported ran PD MILLER, W.C. 8625 ALTON AVE JACKSONVILLE F D MILLER, LINDA	ctions 607 0502 and 60 th, in the State of Florida cept the obligations of, an of repsilined agent and title T DFFICERS AND DIRECT 5, POB 2794 FL	applicable (NO TORS DELETE	tes, the above-named co authorized by the corpora orida Statutes. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-SI-ZIP 2.1 TITLE 2.2 NAME	uired when reinstating)	PL e purpose of cha cept the appointn DATE FICERS AND DIR	nging its registered nent as registered IECTORS IN 12 Change Addition
EF ADERESS SI-7/P SI-7/P DELETE SI-7/P DELETE SI-7/P Change Additio SI-7/P Change Additio SI-7/P SI-7/P Change SI-7/P Change Additio SI-7/P SI-7/P SI-7/P SI-7/P SI-7/P SI-7/P Change Additio SI-7/P Change Additio SI-7/P	EF ADDRESS 3.3 STREET ADDRESS (S1-7)P 3.4 CITY-ST-2JP DELETE 4.1 TITLE 4.2 NAME 4.2 NAME (TADDRESS (S1-7)P 4.3 STREET ADDRESS (S1-7)P 4.3 STREET ADDRESS (S1-7)P 4.3 STREET ADDRESS (S1-7)P 4.4 CITY-ST-2JP (DELETE 5.1 TITLE (DELETE 5.1 TITLE (DELETE 5.1 TITLE (DELETE 5.1 TITLE (S1-7)P (Change) (DELETE 5.1 TITLE (DELETE 5.1 TITLE (S1-7)P (Change) (DELETE 5.3 STREET ADDRESS (S1-7)P (Change) (DELETE 6.1 TITLE (DELETE 6.1 TITLE (Change) Addition (S1-7)P (Change)	Pursuant 1 office or n agent. Lan NATURE E ELADORESS E E F ADDRESS	to the provisions of Sec ogistered agent, or bot in familiar with, and ac Stephene, bject or perfect ran MILLER, W.C. 8625 ALTON AVE JACKSONVILLE F D MILLER, LINDA 8625 ALTON AVE	ctions 607 0502 and 60 th, in the State of Florida cept the obligations of, an of repsilence agent and title T DFFICERS AND DIRECT E, POB 2794 E, POB 2794	applicable (NO TORS DELETE	tes, the above-named co authorized by the corpora orida Statutes. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-SI-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS	uired when reinstating)	PL e purpose of cha cept the appointn DATE FICERS AND DIR	nging its registered nent as registered IECTORS IN 12 Change Addition
SI-7IP 3.4 CITY-ST-ZIP DELETE 4.1 TITLE 4.2 NAME 61 ADDRESS -SI-7/P 44 CITY-ST-ZIP -SI-7/P 10 DELETE 51 ZP 11 ADDRESS -SI-7/P 11 ADDRESS -SI-7/P 11 ADDRESS -SI-7/P 11 DELETE	S1-7# 34 CITY-ST-2# DELETE 4.1 TILE 4.2 NAME 4.2 NAME 4.2 NAME 4.3 STREET ADDRESS -S1-7# 44 CITY-ST-ZIP DELETE 5.1 TITLE DELETE 5.1 TITLE DELETE 5.1 TITLE DELETE 5.1 TITLE Change Addition F1 ADDRESS 5.3 STREET ADDRESS -S1 2#	Pursuant 1 office or n agent. Lan NA'LURE E ELADORESS SL ZIE E Fr ADDRESS ST ZIE E	to the provisions of Sec ogistered agent, or bot in familiar with, and ac Stephene, bject or perfect ran MILLER, W.C. 8625 ALTON AVE JACKSONVILLE F D MILLER, LINDA 8625 ALTON AVE	ctions 607 0502 and 60 th, in the State of Florida cept the obligations of, an of repsilence agent and title T DFFICERS AND DIRECT E, POB 2794 E, POB 2794	applicable (NO) TORS DELETE	tes, the above-named co authorized by the corpora orida Statutes. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE	uired when reinstating)	PL e purpose of cha cept the appointm DATE FICERS AND DIR	nging its registered nent as registered IECTORS IN 12 Change Addition
Image: DELETE 4.1 TITLE Image: I	Image: DELETE 4.1 TILE Image: Image: Additional content of the second c	Pursuant 1 office or n agent. Lan NATURE E ELADORESS SLZI E Fradukess ST-ZIP	to the provisions of Sec ogistered agent, or bot in familiar with, and ac Stephene, bject or perfect ran MILLER, W.C. 8625 ALTON AVE JACKSONVILLE F D MILLER, LINDA 8625 ALTON AVE	ctions 607 0502 and 60 th, in the State of Florida cept the obligations of, an of repsilence agent and title T DFFICERS AND DIRECT E, POB 2794 E, POB 2794	applicable (NO) TORS DELETE	tes, the above-named co authorized by the corport orida Statutes. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME	uired when reinstating)	PL e purpose of cha cept the appointm DATE FICERS AND DIR	nging its registered nent as registered IECTORS IN 12 Change Addition
E1 ADDRESS 43 STREET ADDRESS -S1 - ZiP 44 CITY - S1 - ZiP DELETE 5.1 TiTLE DELETE 5.1 TiTLE S2 NAME 5.3 STREET ADDRESS -S1 - ZiP 5.4 CITY - S1 - ZiP DELETE 6.1 TiTLE DELETE 6.1 TiTLE DELETE 6.1 TiTLE DELETE 6.1 TiTLE DELETE 6.3 STREET ADDRESS	F1 ADDRESS 43 STREET ADDRESS -S1 - 7-P 44 CITY - S1 - ZIP I DELETE 5.1 TITLE I DELETE 5.1 TITLE I DELETE 5.1 STREET ADDRESS S1 - 7.P 5.3 STREET ADDRESS S1 - 7.P 5.4 CITY - ST - ZIP I DELETE 6.1 TITLE I DELETE 6.1 TITLE I DELETE 6.1 TITLE I DELETE 6.3 STREET ADDRESS S1 - 7.P 6.3 STREET ADDRESS S1 - 7.P 6.3 STREET ADDRESS	Pursuant t office or n agent. Lan NATURE E ELATORESS SL20 E FLADRESS ELADRESS	to the provisions of Sec ogistered agent, or bot in familiar with, and ac Stephene, bject or perfect ran MILLER, W.C. 8625 ALTON AVE JACKSONVILLE F D MILLER, LINDA 8625 ALTON AVE	ctions 607 0502 and 60 th, in the State of Florida cept the obligations of, an of repsilence agent and title T DFFICERS AND DIRECT E, POB 2794 E, POB 2794	applicable (NO) TORS DELETE	tes, the above-named co authorized by the corport orida Statutes. E: Registered Agent signature req 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS	uired when reinstating)	PL e purpose of cha cept the appointm DATE FICERS AND DIR	nging its registered nent as registered IECTORS IN 12 Change Addition
-SI-ZP 44 DITY-ST-ZIP DELETE 5.1 TITLE DELETE 5.1 TITLE S2 NAME 52 NAME 53 STREET ADDRESS -ST-ZP -ST-ZP <td>-SI-ZP 44 CiTY-ST-ZIP IDELETE 5.1 TiTLE FLADORESS 52 NAME SET ZP 53 STREET ADDRESS SET ZP 54 CiTY-ST-ZIP IDELETE 6.1 TiTLE IDELETE 6.1 TiTLE IDELETE 6.1 TiTLE IDELETE 6.3 STREET ADDRESS ST ZIP 6.3 STREET ADDRESS ST ZIP 6.4 CiTY-ST-ZIP</td> <td>Pursuant 1 office or n agent. Lan NATURE E ELADORESS SL20 E ELADORESS ST-20 ELADORESS SL20 ELADORESS SL20</td> <td>to the provisions of Sec ogistered agent, or bot in familiar with, and ac Stephene, bject or perfect ran MILLER, W.C. 8625 ALTON AVE JACKSONVILLE F D MILLER, LINDA 8625 ALTON AVE</td> <td>ctions 607 0502 and 60 th, in the State of Florida cept the obligations of, an of repsilence agent and title T DFFICERS AND DIRECT E, POB 2794 E, POB 2794</td> <td>OFF ICADIO TORS</td> <td>tes, the above-named co authorized by the corport orida Statutes. te: Registered Agent signature required in the second statutes and the second statutes are second statutes. te: Registered Agent signature required in the second statutes. tes: Registered Agent signature required in the second statutes. tes: Registered Agent signature required in the second statutes. tes: Registered Agent signature required in the second statutes. tes: Registered Agent signature required in the second statutes. tes: Registered Agent signature required in the second statutes. tes: Registered Agent signature required in the second statutes. tes: Registered Agent signature required in the second statutes. tes: Registered Agent signature required in the second statutes. tes: Registered Agent signature required in the second statutes. tes: Registered Agent signature required in the second statutes. tes: Registered Agent signature required in the second statutes. tes: Registered Agent signature required in the second statutes. tes: Registered Agent signature required in the second statutes. tes: Registered Agent signature required in the second statutes. tes: Registered Agent signature required in the second statutes. tes: Registered Agent signature required in the second statutes. tes: Registered Agent signature required in the second statutes. tes: Registered Agent signature required in the second statutes. tes: Registered Agent signature required in the second statutes. tes: Registered Agent signature required in the second statutes. tes: Registered Agent signature required in the second statutes. tes: Registered Agent signature required in the second statutes. tes: Registered Agent signature required in the second statutes. tes: Registered Agent signature required in the second statutes. tes: Registered Agent signature required in the second statutes. tes: Registered Agent signature required in the second statutes. tes: Registered Agent signature required in the second statutes. tes: Registered Agent</td> <td>uired when reinstating)</td> <td>PL e purpose of cha cept the appoint DATE FICERS AND DIR</td> <td>nging its registered nent as registered IECTORS IN 12 Change Addition</td>	-SI-ZP 44 CiTY-ST-ZIP IDELETE 5.1 TiTLE FLADORESS 52 NAME SET ZP 53 STREET ADDRESS SET ZP 54 CiTY-ST-ZIP IDELETE 6.1 TiTLE IDELETE 6.1 TiTLE IDELETE 6.1 TiTLE IDELETE 6.3 STREET ADDRESS ST ZIP 6.3 STREET ADDRESS ST ZIP 6.4 CiTY-ST-ZIP	Pursuant 1 office or n agent. Lan NATURE E ELADORESS SL20 E ELADORESS ST-20 ELADORESS SL20 ELADORESS SL20	to the provisions of Sec ogistered agent, or bot in familiar with, and ac Stephene, bject or perfect ran MILLER, W.C. 8625 ALTON AVE JACKSONVILLE F D MILLER, LINDA 8625 ALTON AVE	ctions 607 0502 and 60 th, in the State of Florida cept the obligations of, an of repsilence agent and title T DFFICERS AND DIRECT E, POB 2794 E, POB 2794	OFF ICADIO TORS	tes, the above-named co authorized by the corport orida Statutes. te: Registered Agent signature required in the second statutes and the second statutes are second statutes. te: Registered Agent signature required in the second statutes. tes: Registered Agent signature required in the second statutes. tes: Registered Agent signature required in the second statutes. tes: Registered Agent signature required in the second statutes. tes: Registered Agent signature required in the second statutes. tes: Registered Agent signature required in the second statutes. tes: Registered Agent signature required in the second statutes. tes: Registered Agent signature required in the second statutes. tes: Registered Agent signature required in the second statutes. tes: Registered Agent signature required in the second statutes. tes: Registered Agent signature required in the second statutes. tes: Registered Agent signature required in the second statutes. tes: Registered Agent signature required in the second statutes. tes: Registered Agent signature required in the second statutes. tes: Registered Agent signature required in the second statutes. tes: Registered Agent signature required in the second statutes. tes: Registered Agent signature required in the second statutes. tes: Registered Agent signature required in the second statutes. tes: Registered Agent signature required in the second statutes. tes: Registered Agent signature required in the second statutes. tes: Registered Agent signature required in the second statutes. tes: Registered Agent signature required in the second statutes. tes: Registered Agent signature required in the second statutes. tes: Registered Agent signature required in the second statutes. tes: Registered Agent signature required in the second statutes. tes: Registered Agent signature required in the second statutes. tes: Registered Agent signature required in the second statutes. tes: Registered Agent signature required in the second statutes. tes: Registered Agent	uired when reinstating)	PL e purpose of cha cept the appoint DATE FICERS AND DIR	nging its registered nent as registered IECTORS IN 12 Change Addition
Image: DELETE 5.1 TiTLE Image: I	Image: DELETE 5.1 Title Image: I	Pursuant 1 office or n agent. Lan NATURE ELADORESS ST. 20 ELADORESS ST. 20 ELADORESS ST. 20 ELADORESS ST. 20 ELADORESS	to the provisions of Sec ogistered agent, or bot in familiar with, and ac line aloc: lyied or perfect rain PD MILLER, W.C. 8625 ALTON AVE JACKSONVILLE F D MILLER, LINDA 8625 ALTON AVE	ctions 607 0502 and 60 th, in the State of Florida cept the obligations of, an of repsiloned agent and title T DFFICERS AND DIRECT E, POB 2794 E, POB 2794	OFF ICADIO TORS	Ies, the above-named co authorized by the corport orida Statutes. I.I. TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME	uired when reinstating)	PL e purpose of cha cept the appoint DATE FICERS AND DIR	nging its registered nent as registered IECTORS IN 12 Change Addition
E LADORESS 5.3 STREET ADORESS ST Z# 5.4 CITY - ST - ZIP DELETE 6.1 TITLE E 6.2 NAME F1 ADORESS 6.3 STREET ADORESS	E1 ADDRESS 5.3 STREET ADDRESS IST ZIP 6.4 CITY - ST - ZIP IDELETE 6.1 TITLE IDELETE 6.1 TITLE IDELETE 6.2 NAME E1 ADDRESS 6.3 STREET ADDRESS IST ZIP 6.4 CITY - ST - ZIP	Pursuant 1 office or n agent. Lan NATURE E ELADORESS ST-20 E ELADORESS ST-20 ELADORESS ST-20 ELADORESS ST-20 ELADORESS	to the provisions of Sec ogistered agent, or bot in familiar with, and ac line aloc: lyied or perfect rain PD MILLER, W.C. 8625 ALTON AVE JACKSONVILLE F D MILLER, LINDA 8625 ALTON AVE	ctions 607 0502 and 60 th, in the State of Florida cept the obligations of, an of repsiloned agent and title T DFFICERS AND DIRECT E, POB 2794 E, POB 2794	OFF ICADIO TORS	tes, the above-named co authorized by the corpora orida Statutes. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY-ST-ZIP	uired when reinstating)	PL e purpose of cha cept the appoint DATE FICERS AND DIR	nging its registered nent as registered IECTORS IN 12 Change Addition
S1 Z# 5.4 CITY - ST - ZIP DELETE 6.1 TITLE DELETE 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS	S1 Z# 6.4 CITY - S1 - ZIP DELETE 6.1 TITLE Change Addrtii 6.2 NAME 6.3 STREET ADDRESS 6.3 STREET ADDRESS S1 ZIP	Pursuant t office or n agent. Lan NATURE E ELADORESS ST-ZIE E ELADORESS ST-ZIE ELADORESS ST-ZIE ELADORESS ST-ZIE ELADORESS SL-ZIE ELADORESS SL-ZIE	to the provisions of Sec ogistered agent, or bot in familiar with, and ac line aloc: lyied or perfect rain PD MILLER, W.C. 8625 ALTON AVE JACKSONVILLE F D MILLER, LINDA 8625 ALTON AVE	ctions 607 0502 and 60 th, in the State of Florida cept the obligations of, an of repsiloned agent and title T DFFICERS AND DIRECT E, POB 2794 E, POB 2794	OFF ICADIO (NO TORS	tes, the above-named co authorized by the corpora orida Statutes.	uired when reinstating)	FL e purpose of cha cept the appoint DATE FICERS AND DIR	Inging its registered nent as registered IECTORS IN 12 Change Addition Change Addition
DELETE 6.1 TITLE Change Addition 6.2 NAME 6.3 STREET ADDRESS	E Change Addition E Change Add	Pursuant 1 office or m agent. Lan NATURE E ELADORESS ST-ZIE E F ADDRESS ST-ZIE E ELADORESS ST-ZIE ELADORESS ST-ZIE ELADORESS ST-ZIE ELADORESS	to the provisions of Sec ogistered agent, or bot in familiar with, and ac line aloc: lyied or perfect rain PD MILLER, W.C. 8625 ALTON AVE JACKSONVILLE F D MILLER, LINDA 8625 ALTON AVE	ctions 607 0502 and 60 th, in the State of Florida cept the obligations of, an of repsiloned agent and title T DFFICERS AND DIRECT E, POB 2794 E, POB 2794	OFF ICADIO (NO TORS	tes, the above-named co authorized by the corpora orida Statutes. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-SI-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-SI-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-SI-ZIP 4.1 TITLE 4.2 NAME 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY-SI-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-SI-ZIP 5.1 TITLE 5.2 NAME	uired when reinstating)	FL e purpose of cha cept the appoint DATE FICERS AND DIR	Inging its registered nent as registered IECTORS IN 12 Change Addition Change Addition
ET ADDRESS 6.3 STREET ADDRESS	E CADORESS 6.3 STREET ADDRESS ST. ZIP 6.4 CITY - ST - ZIP	Pursuant 1 office or n agent. Lan NATURE E ELADORESS SE20 E F ADDRESS SE20 E ELADORESS SE20 E ELADORESS ELADORESS ELADORESS	to the provisions of Sec ogistered agent, or bot in familiar with, and ac line aloc: lyied or perfect rain PD MILLER, W.C. 8625 ALTON AVE JACKSONVILLE F D MILLER, LINDA 8625 ALTON AVE	ctions 607 0502 and 60 th, in the State of Florida cept the obligations of, an of repsiloned agent and title T DFFICERS AND DIRECT E, POB 2794 E, POB 2794	OFF ICADIO (NO TORS	tes, the above-named co authorized by the corpora orida Statutes.	uired when reinstating)	FL e purpose of cha cept the appoint DATE FICERS AND DIR	Inging its registered nent as registered IECTORS IN 12 Change Addition Change Addition
	51-71P 6.4 CITY - ST - ZIP	Pursuant 1 office or n agent. Lan NATURE E ELADRESS SLADRESS ST-70 ELADRESS SL-70 ELADRESS ELADRESS SL-70 ELADRESS ELADRESS	to the provisions of Sec ogistered agent, or bot in familiar with, and ac line aloc: lyied or perfect rain PD MILLER, W.C. 8625 ALTON AVE JACKSONVILLE F D MILLER, LINDA 8625 ALTON AVE	ctions 607 0502 and 60 th, in the State of Florida cept the obligations of, an of repsiloned agent and title T DFFICERS AND DIRECT E, POB 2794 E, POB 2794	aFF icable (NO) TORS DELETE DELETE DELETE DELETE DELETE DELETE DELETE	tes, the above-named co authorized by the corpora orida Statutes. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-SI-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-SI-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-SI-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY-SI-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-SI-ZIP	uired when reinstating)	PL e purpose of cha cept the appointm DATE FICERS AND DIR 1	Inging its registered nerit as registered ECTORS IN 12 Change Addition Change Addition Change Addition Change Addition
		Pursuant 1 office or n agent. Lan NA1 URE E ELADORESS SE20 E FLADORESS SE20 E ELADORESS SE20 E ELADORESS ELADORESS SE20 E	to the provisions of Sec ogistered agent, or bot in familiar with, and ac line aloc: lyied or perfect rain PD MILLER, W.C. 8625 ALTON AVE JACKSONVILLE F D MILLER, LINDA 8625 ALTON AVE	ctions 607 0502 and 60 th, in the State of Florida cept the obligations of, an of repsiloned agent and title T DFFICERS AND DIRECT E, POB 2794 E, POB 2794	aFF icable (NO) TORS DELETE DELETE DELETE DELETE DELETE DELETE DELETE	tes, the above-named co authorized by the corpora orida Statutes. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY - ST - ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP 5.1 TITLE 5.1 TITLE 5.1 TITLE 5.1 STREET ADDRESS 5.4 CITY - ST - ZIP 5.1 TITLE 5.1 TITLE	uired when reinstating)	PL e purpose of cha cept the appointm DATE FICERS AND DIR 1	Inging its registered nent as registered ECTORS IN 12 Change Addition Change Addition Change Addition Change Addition
I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the	LOS LOS COMPANY ON THE RECEIPTION FOR THE THE AND ACCOUNT OF A COMPANY OF THE ACCOUNT OF A COMPANY OF	Pursuant 1 office or n agent. Lan INA'LURE E ELADORESS -ST-ZIE E ELADORESS -ST-ZIE E ELADORESS -ST-ZIE E ELADORESS -ST-ZIE E ELADORESS -ST-ZIE E ELADORESS -ST-ZIE E	to the provisions of Sec ogistered agent, or bot in familiar with, and ac line aloc: lyied or perfect rain PD MILLER, W.C. 8625 ALTON AVE JACKSONVILLE F D MILLER, LINDA 8625 ALTON AVE	ctions 607 0502 and 60 th, in the State of Florida cept the obligations of, an of repsiloned agent and title T DFFICERS AND DIRECT E, POB 2794 E, POB 2794	aFF icable (NO) TORS DELETE DELETE DELETE DELETE DELETE DELETE DELETE	tes, the above-named co authorized by the corport orida Statutes. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY - ST - ZIP 4.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP 5.1 TITLE 5.2 NAME	uired when reinstating)	PL e purpose of cha cept the appointm DATE FICERS AND DIR 1	Inging its registered nent as registered ECTORS IN 12 Change Addition Change Addition Change Addition Change Addition