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s. Name and Address of Current Registered Agent 10, Name and Address of New Registered Agent 10, Name and Address 10, Name and	Zıp	25	Country		Zip	h	untry		Florida Statutes 🛛 🗙 Yes	s 🔲 No		199.032,
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4160 SOUTHSIDE BLVD, SUITE 3 JACKSONNILLE FL 32216 83 Fursuant to the provision: of Section 607 0007 send 607 1508. Hords Statutes. The above named corporation submits this statement for the purpose of charging its registered office or registered agent. Lam familiar with, and secept the obligations of, Section 607 0005, Florida Statutes. NATURE Tarnibar with, and secept the obligations of, Section 607 0005, Florida Statutes. MOIT Repare agent was authorized by the corporation's board of directors. I hereby accept the appointment as registered office or registered agent. Lam familiar with, and secept the obligations of, Section 607 0005, Florida Statutes. NATURE Tarnibar with, and secept the obligations of, Section 607 0005, Florida Statutes. MOIT Repare Agent agent was remained for the obligation agent on the interval of the obligation agent on the obligation agent on the obligation agent on the interval of the obligation agent on the interval of the obligation agent on the	BISBEE	, Frank D.,	. Ht				1 1	Addres	s (P.O. Box Number is Not Accepta	ible)		
Pursuant to the provisions of Sections 607.0002 and 607.1008. Florida Statutes, the above named corporation submits the statement for the purpose of changing its registered offic or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I an 'tamiar with, and accept the objections of Josof Andrea Statutes. Best State Stat												
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4. Too hereby certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that the information indicated on the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 or Chapter 607, or on an articlement with an accurace.	Pursuant to or registere- familiar with SNATURE	a the provision of agent, or bo n, and accept of BISBEE, 4160 St JACKSC SVD BISBEE 4160 St JACKSC V GILLEO 4160 S JACKSC	s of Sections 607.0502 a th, in the State of Florida the obligations of, Sectio initial name of registricit agent ar OFFICERS AND FRANK D. III DUTHSIDE BLVD #3 DNMILLE, FL 32216 , ANNA G. DUTHSIDE BLVD #3 DNVILLE FL , MICHELLE R. OUTHSIDE BLVD #3 DNVILLE FL		Change was full 505, Fiorida Sta TORS DELETE DELETE DELETE DELETE DELETE DELETE	(NOTE: Rogistion (NOTE: Rogistion 12 1 1 1 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2	ed April Egnature ed April Egnature I TITLE NAME STREET ADDRESS CUTY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS 4 CITY-ST-ZIP TITLE NAME STREET ADDRESS 4 CITY-ST-ZIP TITLE NAME STREET ADDRESS 4 CITY-ST-ZIP TITLE 2 NAME 3 STREET ADDRESS 4 CITY-ST-ZIP TITLE 2 NAME 3 STREET ADDRESS 4 CITY-ST-ZIP 1 TITLE 2 NAME 3 STREET ADDRESS 4 CITY-ST-ZIP		ADDITIONS/CHANGES TO OF	DATE TICERS ANI		Pregistered offici d agent. I am DRS IN 12 Addition Addition Addition