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SW EXD, ALENLE #22 721 SM SMO KNELLE #22 , SUUTH MANIE FL 33143 DD NOT WRITE IN THIS SPACE 3. Data Incorporated or Qualified 07/14/1980 3. Data Incorporated or Qualified 07/14/1980 Applied For- SP 2011400 3. Data Incorporated or Qualified 07/14/1980 Sute, Apl. #, etc. S. Certificate of Status Desired \$8.75 Additional Pee Required 3. Data Incorporated or Qualified 07/14/1980 State, Apl. #, etc. S. Certificate of Status Desired \$8.75 Additional Pee Required 3. Data Incorporated or Qualified 07/14/1980 Country Zp Country \$8.00 Mys Bag. 3. Data Incorporation or State Incorporation or Qualified 123 30 This corporation or State Incorporation Incorporatio	KENT E	n Name STATES INC. e of Business	Mail	•			
Principal Place of Business 2a. Mailing Address 4. EEI Number Application Suite, Apt. #, etc. 23 Suite, Apt. #, etc. 59-2011400 Nath Application Suite, Apt. #, etc. 27 Chy & Suite 59-2011400 Nath Application Suite, Apt. #, etc. 27 Chy & Suite 6. Election Campaign Financing Address for Application Suite, Apt. #, etc. 28 Country 29 Suite 6. Election Campaign Financing Address for Application Suite, Apt. #, etc. 29 Suite E. This cooperation oxes the current year Intarging Address for Application 30 Rume and Address of Current Registered Agent 8. This cooperation oxes the current year Intarging in the Acceptable Suite Address (P.O. Box Number is Net Acceptable) SOUTH MIAHI, FL 33143 44 City File 85 Zip Code Pursuant to the provisions of Sections 607 (502, end 607 (502, Fibrida Statutes, the above named cooperation submits this statement for the puppose of changing in registered address of Country in the obligators of Sections 607 (502, Fibrida Statutes, the above named cooperation submits the statement of the puppose of changing in registered address of Country in the obligators of Sections 607 (502, Fibrida Statutes, the above named cooperation submits the statement of the puppose of changing in registered address of	11 SW 62ND) AVENUE #202	7731	SW 62ND AVENUE #2	02,	3. Date Incorporated or Qualifed	THIS SPACE
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1261 Trust Evol Controlution Addition to the service of the comparison of the	City & Stat	le		City & State			
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AMBER, HENRY M 7731 SW 62NO AVENUE #202 SOUTH MIANI, FL 33143 Presume to the provisions of Sections 607.0502 and 607.1508. Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I an familiar with, and accept the obligations of. Section 607.0502. Florids Statutes. NATURE 3gradues typed or pulses and of agenere system OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 14. CITY STATE OFFICERS AND DIRECTORS 15. AMBER, LAURIE K. 12. TITLE 23. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 14. CITY STATE Change AMBER, HENRY M 22. TITLE 23. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change AMBER, HENRY M 22. TITLE 23. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change AMBER, HENRY M 22. TITLE 23. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change AMBER, HENRY M 22. TITLE 23. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change AMBER, HENRY M 22. TITLE 23. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change AMBER, HENRY M 22. TITLE 23. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change AMBER, HENRY M 22. TITLE 23. ADDITIONS/CHANGES 35. ZP 35.		9. Name and Address	of Current Registe	ered Agent		10. Name and Address of New Regist	ered Agent
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officer or director of 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	3314 Pursuant office or r agent. I a SNATURE E E E E E E E E E E E E E E E E E E	to the provisions of Section registered agent, or both, in am familiar with, and accept Signature, typed or printed name of in OFFI AMBER, LAURIE K. 7731 SW 62 AVENUE SOUTH MIAMI FL DVS AMBER, HENRY M. 7731 SW 62 AVENUE SOUTH MIAMI FL	the State of Florida the obligations of, 5 egistered agent and title if a ICERS AND DIREC #202	. Such change was au Section 607.0505, Flor applicable. (NOTE: TORS DELETE DELETE	s, the above-named corr thorized by the corporati da Statutes. Registered Agent signature requir 13. 1.1 TITLE 12 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 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS	ed when reinstating)	FL