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Suite. Apl. #, etc. Suite. Apl. #, etc. 01252008 Chg.NP CR2E037 (12/06) Chy & State City & State I. HEI Number SS-555012 III Zip Country Zip Country S. Certificate of Status Desired S8.75 A Aname and Address of Current Registered Agent Name and Address of New Registered Agent Name and Address of New Registered Agent Name BO S W O R T H L A R R X RICHMOND, Richards Stread Address of New Registered Agent Name BO S W O R T H L A R R X Stread Address of Income and Address of New Registered Agent Name BO S W O R T H L A R R X Stread Appress (P O. Box Number is Not Acceptable) Stread Appress (P O. Box Number is Not Acceptable) TH A The above named entry submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Lam familiar with the obligations of registered agent. I/31/08 Stream Spect or registered agent device agent. Matter Address and Mater State of Florida. Lam familiar with the obligations and the faccable. I/31/08 Stream Spect or registered agent device agent age	Applied Not Appl dditional red
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