DOOU	MENT # 720451							
ΖΑΡΤ	INC.					FILED		
Principal Plac	a of Business	Mailing Address				02 OCT 15 PM	2:13	
Principal Place of Business		927 S CENTRAL AVE			SECRETARY OF STATE			
Popka FL 32	2703	APOPKA FL 32703			1 100110 10010 10010	ALLAHASSEE, FL		
. Principal P	Place of Business	3. Mailing Address						
Suite, Apt. #, etc. City & State		Suite, Apt. #, etc.			D	DO NOT WRITE IN THIS SPACE		
		City & State		4. FEI Number NOT ADDI ICABI E				
Zip	Country	Zip		try	S. Certificate of Status Desired     S. Certificate of Status Desired		le	
6. Name and Address of Curre		ent Registered Agent			5. Certificate of Status Desired       Got Control Additional         7. Name and Address of New Registered Agent			
				Name				
	BARBARA A	<b>~</b>		Street Address (P.O. Box Number is Not Acceptable)				
405 SHELBY COURT APOPKA FL 32712							Zip Code	
				City				
. The above the obligat	e named entity submits this statement tions of registered agent. <u>Signature, typed or printed name of registered age</u>	byte.			stered agent, or both, in th	10-9-0 DATE	International accession of the second	pt
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