. Entity Nam	MENT # 744026				\mathbf{S}	ay 02, 20 ecretary	y of Sta	ate
Principal Plac 304 SE 22ND APE CORAL I S		Mailing Address 4012 SE 19 AVENUE APT. C203 CAPE CORAL FL 33904 US				International contraction of the state of the	IRTI BILATI DIRIL DIRIL DIT	112 813 91 1 88 3
. Principal F	Place of Business	3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.						
City & Stat		City & State						oplied For
					4. FEI Number 5	9-2442065	N	ot Applicable
Zip	Country	Zip	Cou	ntry	5. Certificate of S	itatus Desired] \$8.75 Ad Fee Require	
	6. Name and Address of Curren	nt Registered Agent		Name	7. Name and Ad	dress of New Registe	ered Agent	
ARRASMITH, GRANT H 4012 SE 19 AVENUE				Street Address (P.O. Box Number is Not Acceptable)				
APT C-20	03 Dral Fl 33904				Same			
OAFE GU	JIVAL FL 33304			City			FL Zip Cod	e
the obligat	e named entity submits this statement tions of registered agent.	nt and title if applicable. (N	IOTE: Registered	d Agent signature r	ASD-1 required when reinstating)	1 30 20	DATE	
the obligat	tions of registered agent.	nt and title if applicable. (N 9. Election C Trust Fund	OTE: Registered Campaign Fi d Contributic	d Agent signature r	required when reinstating) \$5.00 May Be Added to Fees	/ <u>30</u> 20 Make C Florida De	heck Payable	to State
the obligat	tions of registered agent.	nt and title if applicable. (N 9. Election C Trust Fund	IOTE: Registered	I Agent signature r inancing on.	required when reinstating) \$5.00 May Be Added to Fees ADDITIONS/CHANG	<u>/ 30 20</u> Make C	heck Payable	to State
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the obligat GNATURE GNATURE E E E E E E E E E E E ADDRESS E E E E E E E E E E ADDRESS	tions of registered agent. Signature, typed or printed name of registered agent FILE NOW: FEE IS \$61.25 OFFICERS AND D T ARRASMITH, GRANT H 4012 SE 19TH AVE APT C203	nt and title if applicable. (N 9. Election C Trust Func DIRECTORS	IOTE: Registered Campaign Find d Contribution 11. TITLE NAME CITY- TITLE NAME STREE STREE	I Agent signature r inancing on.	ADDITIONS/CHANG	Make C Florida De SES TO OFFICERS AN	bate Theck Payable epartment of S	to State
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