ANAMA CITY FL 32601 PANAMA CITY FL 32601/2001 DO NOT WRITE IN THIS SPACE 3. Date Incorrect and or Qualified a. Date Incorrect and or Qualified a. Date Incorrect and or Qualified B. Date Incorrect and or Qualified A. Date Incorrect and O. Date Incorrect and or Qualified A. Date Incorect and Or Qualified A. Date	OCUUNU NO	DTICE: CORPORATION WILL BE IN OR REFORE 9/17/97: \$51,25 (IF DISS	DISSOLVED ON OR AFTER	SEPTEMBER 17, 1997 IE TO REINSTATE [,] \$236.25	, F	ILED	
	NO	NPROFIT	FLORIDA DEPA	RTMENT OF STATE	Sep 17 1		
THE CHURCH OF THE LIVING GOD BY FAITH, INC. Immogen Place of Business Maling Address Proceed of Business Pole Divisions Name CHT FL 3201 Divisions Proceed of Business Pole Divisions Name CHT FL 3201 Divisions Proceed of Business Pole Divisions Back Appl FL divisions Pole Divisions State Appl FL divisions Pole Divisions Back Appl FL divisions Pole Divisions Back Appl FL divisions Pole Divisions Coluble Control Pole Divisions Coluble Control Pole Divisions Coluble Control Pole Divisions Proceed Divisions of Business Pole Divisions Coluble Control Pole Divisions Pole Divisions of Business of Coursen Registered Agent Division Pole Divisions of Bactors of Division Registered Agent Coluble Chroling Control Pole Divisions of Bactors of Pole Divisions of Bactors Of Division Control Division Registered Agent Coluble Chroling Control Pole Divisions of Bactors Of Pole Divisions of Bactors Of Division Control Division Registered Agent Coluble Chroling Control Pole Divisions of Bactors Of Division Chroling Control Paramet On thigh Pole Disoland Of		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1		•	Secreta	ary of S	state
	DOCUI Corporation	MENT # 759026	6 (8)				
Analyse Transport of Business P.O. BOX 200 PANAMA CITY FL 32601 P. DAVID RUCE OF Business P. D. BOX 200 PANAMA CITY FL 32601 P. DAVID RUCE OF Business P. D. BOX 200 PANAMA CITY FL 32601 DV 8 State	THE CH	iurch of the living go	d by faith, inc.		i tanın okan akın anın anın anın	nii ninii ninii sinii sinii n	
NAMA CITY FL S201 PAMMA CITY FL S201-301 DOUT WRITE IN THIS SPACE Image: State	rincipal Place	e of Business	Mailing Address				
Op/Sig0 19acb of Business 2a. Mailing Address 4. FEB Warrow Applied For Buile Apit #, etc. 2a Suite Apit #, etc. 2a Applied For 5b-7966502 Molt Applied For City & State 2a Suite Apit #, etc. 27 Suite Apit #, etc. 27 Country a Election Cernspain Financeng \$5.00 May tie Zip Country 2a Country a Election Cernspain Financeng \$5.00 May tie Zip Country 2a Country a Country a Name and Address of New Registered Agent Zip Country 2a Country a Name and Address of New Registered Agent COLE, BENNIE 3a Statuber Concernspain Financeng Statuber Con	2 Mercedes Nama City F	il 32401		301			10000
Setter Setter<					06/30/1981	01/21/19	97
Suite, Apt. #, etc.	. Principal Pl	ace of Business					
City & State City & State B. Election company Financing S5.00 May be and the provide provi		#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75	Additional
ZIP Country Zip Country R. This scoperation owes or has paid the current year Intendble Personal Property Ray due Junes 00. No No 0. 9. Name and Address of Current Registered Agent 10. Name and Address of Current Registered Agent 10. Name and Address of Name Registered Agent COLE, BENNIE 135. AUDREY CIRCLE NW 91 Name 92 Street Address (F.O. Box Number Is Not Acceptable) 87. F. WALTON BEACH FL 32548 93 93 94 City FL 85 14. Pursuant to the provisions of Sections 617.0502 and 617.1503. Forda Statutes, the above-named corporation subtills this statement for the pursue of the objaction of Sections 70.303. Forda Statutes 96 20 Code 15. Variation of Sections 617.0502 and 617.1503. Forda Statutes. 130 Abottrouts of the objaction to Section 617.0503. Forda Statutes. 140 Code 150 </td <td></td> <td>9 ·</td> <td>City & State</td> <td></td> <td></td> <td>\$5.00</td> <td>May Be</td>		9 ·	City & State			\$5.00	May Be
	Zip	Country	Zip	h	8. This corporation owes or has p	aid the current year Int	tangible
COLE, BENNIE 135 AUDREY CIRCLE NW FT. WALTON BEACH FL 32546		Name and Address of Curren					
Biginues uped or private name of inguineta, and to it is				84 City		FL 85 Zip	Code
TILE SO DELETE 1.1 TITLE 1.1 TITLE Addited and the semetian of	1. Pursuant t office or re agent. I a	to the provisions of Sections 617.050 egistered agent, or both, in the State m familiar with, and accept the oblig	02 and 617.1508, Florida Statu 9 of Florida. Such change was lations of, Section 617.0503, F	tes, the above-named co	rporation submits this statement for the ation's board of directors. I hereby acce	PL	ts registered
ME JONES, LINDA F 12 NAME REET ADDRESS 1329 16TH STREET 13 STREET ADDRESS TY-ST-ZIP PANAMA CITY FL 14 CITY-ST-ZiP REET ADDRESS 12 NAME 14 CITY-ST-ZiP TO DELETE 21 TITLE WR COLE, QUEEN E 22 NAME REET ADDRESS 135 AUDREY CIRCLE NW 23 STREET ADDRESS TY-ST-ZIP FT. WALTON BEACH FL 2.4 CITY-ST-ZIP REET ADDRESS 135 AUDREY CIRCLE NW 2.3 STREET ADDRESS TY-ST-ZIP FT. WALTON BEACH FL 2.4 CITY-ST-ZIP REET ADDRESS 135 AUDREY CIRCLE NW 3.3 STREET ADDRESS TY-ST-ZIP THE 3.4 CITY-ST-ZIP REET ADDRESS 4.4 CITY-ST-ZIP Change NKE DELETE 4.1 TITLE REET ADDRESS 4.2 NAME TY-ST-ZIP 4.4 CITY-ST-ZIP REET ADDRESS 5.3 STREET ADDRESS TY-ST-ZIP Change Addit REET ADDRESS 5.3 STREET ADDRESS 5.3 STREET ADDRESS TY-ST-ZIP DELETE 5.1 TITLE REET ADDRESS 5.3 STREET ADDRESS 5.3 STREET ADDRESS TY-ST-ZIP DELETE 6.1 TITLE REET ADDRESS 5.3 STREET ADDRESS TY-ST-ZIP	office or n agent. I a IGNATURE	egistered agent, or both, in the State m familiar with, and accept the oblig	o of Florida. Such change was ations of, Section 617.0503, F	tes, the above-named co authorized by the corpora lorida Statutes.	ation's board of directors. I hereby acce	purpose of changing in pt the appointment as	ts registere
NEET ADDRESS 1329 10TH STREET 1.3 STREET ADDRESS I'Y-ST-2IP I'LE I'LE I'LE NE COLE, GUEEN E 2.2 NAME I'S AUDREY CIRCLE NW 2.3 STREET ADDRESS I'Y-ST-2IP I'LE I'LE VIS.T2/P I'LE I'LE NE COLE, GUEEN E 2.3 STREET ADDRESS I'Y-ST-2IP I'LE I'LE VIS.T2/P I'LE I'LE NEE I'LE I'LE NEE I'LE I'LE NEE I'LE	office or re agent. I ar GNATURE	egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or printed name of registered age OFFICERS AN	e of Florida. Such change was lations of, Section 617.0503, F ent and tile if epplicable. (NC ID DIRECTORS	tes, the above-named con authorized by the corpora lorida Statutes. TE: Registered Agent signature req 13.	ation's board of directors. I hereby acce	Durpose of changing in put the appointment as DATE CERS AND DIRECTOR	ts registered registered
Yr-ST-ZIP PANAMA CITY FL 14 CITY-ST-ZIP LE TD DELETE 21 TITLE ME COLE, QUEEN E 23 STREET ADDRESS Addit Yr-ST-ZIP ETWALTON BEACH FL 2.4 CITY-ST-ZIP	office or re agent. I an GNATURE	egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or printed name of registered age OFFICERS AN	e of Florida. Such change was lations of, Section 617.0503, F ent and tile if epplicable. (NC ID DIRECTORS	tes, the above-named co authorized by the corpora lorida Statutes. TE: Registered Agent signature req 13. 1.1 RITLE	ation's board of directors. I hereby acce	Durpose of changing in put the appointment as DATE CERS AND DIRECTOR	ts registere registered
TD DELETE 2.1 Title Change Addit ME COLE, QUEEN E 22 NAME 23 StreET ADDRESS 7-ST-2/P FT. WALTON BEACH FL 2.4 CITY-ST-2/P 2.4 CITY-ST-2/P 2.4 CITY-ST-2/P 7-ST-2/P Change Addit ME COLE, BENNIE 3.1 Title 3	office or ra agent. I an GNATURE 2. ILE ME	egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or printed name of registered ag OFFICERS AN SD JONES, LINDA F	e of Florida. Such change was lations of, Section 617.0503, F ent and tile if epplicable. (NC ID DIRECTORS	tes, the above-named col authorized by the corpora lorida Statutes. TE: Registered Agent signature registered 13. 1.1 TITLE 1.2 NAME	ation's board of directors. I hereby acce	Durpose of changing in put the appointment as DATE CERS AND DIRECTOR	ts registere registered
MRE COLE, QUEEN E 22 NAME REET ADDRESS 135 AUDREY CIRCLE NW 2.3 STREET ADDRESS I'LE PD DELETE 3.1 TILE ME COLE, BENNIE 3.2 NAME REET ADDRESS 135 AUDREY CIRCLE NW 3.3 STREET ADDRESS I'LE PT WALTON BEACH FL Change Addit Addit 3.2 NAME NE COLE, BENNIE 3.2 NAME I'LE J DELETE 3.1 TILE I'LE J DELETE 4.1 TITLE I'LE J DELETE 4.1 TITLE ME REET ADDRESS 4.2 NAME REET ADDRESS 4.2 NAME 4.2 NAME NE STREET ADDRESS 4.4 CITV-ST-2IP UE DELETE 5.1 TITLE Change Addit ME S.3 STREET ADDRESS 5.3 STREET ADDRESS 4.4 CITV-ST-2IP 4.4 CITV-ST-2IP UE DELETE 5.1 TITLE Change Addit ME S.3 STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITV-ST-2IP LE DELETE 6.1 TITLE Change Addit <	office or ra agent. I an GNATURE 2. ILE ME REET ADDRESS	egistered agent, or both, in the State m familiar with, and accept the oblig Bignature, typed or printed name of registered ag OFFICERS AN SD JONES, LINDA F 1329 16TH STREET	e of Florida. Such change was lations of, Section 617.0503, F ent and tile if epplicable. (NC ID DIRECTORS	tes, the above-named col authorized by the corpora lorida Statutes. TE: Registered Agent signature req 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	ation's board of directors. I hereby acce	Durpose of changing in put the appointment as DATE CERS AND DIRECTOR	ts registere registered
NY-ST-ZIP ETWALTON BEACH FL 2.4 CITY-ST-ZIP LE PD DELETE 3.1 TITLE ME COLE, BENNIE 3.2 NAME REET ADDRESS 135 AUDREY CIRCLE NW 3.3 STRET ADDRESS TY-ST-ZIP FT. WALTON BEACH FL 3.4 CITY-ST-ZIP LE DELETE 4.1 TITLE ME 4.2 NAME REET ADDRESS 4.3 STREET ADDRESS TY-ST-ZIP 4.4 CITY-ST-ZIP LE DELETE ME 4.2 NAME REET ADDRESS 4.3 STREET ADDRESS TY-ST-ZIP 4.4 CITY-ST-ZIP LE DELETE ME 4.2 NAME REET ADDRESS 4.3 STREET ADDRESS TY-ST-ZIP 4.4 CITY-ST-ZIP LE DELETE 5.3 STREET ADDRESS TY-ST-ZIP 5.4 CITY-ST-ZIP LE DELETE 6.1 TITLE ME 6.2 NAME 6.3 STREET ADDRESS TY-ST-ZIP 5.4 CITY-ST-ZIP LE DELETE 6.1 TITLE ME 6.3 STREET ADDRESS TY-ST-ZIP 6.4 CITY-ST-ZIP	office or re agent. I ar GNATURE _ C. C. C. C. C. C. C. C. C. C. C. C. C.	egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or printed name of registered ag OFFICERS AN SD JONES, LINDA F 1329 16TH STREET PANAMA CITY FL	ent and ville it applicable. (NC ID DIRECTORS	tes, the above-named col authorized by the corpora lorida Statutes. TE: Registered Agent signature req 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	ation's board of directors. I hereby acce	Durpose of changing in put the appointment as DATE CERS AND DIRECTOR	ts registered registered RS IN 12
LE PD DELETE 3.1 TITLE Change Addit ME COLE, BENNIE 3.2 NAME 3.3 STREET ADDRESS 3.3 STREET ADDRESS 135 AUDREY CIRCLE NW 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP Change Addit LE DELETE 4.1 TITLE Change Addit ME 4.2 NAME 4.3 STREET ADDRESS Addit IV-ST-ZIP 4.3 STREET ADDRESS 4.3 STREET ADDRESS Addit IV-ST-ZIP 4.4 CITY-ST-ZIP Change Addit V-ST-ZIP 4.4 CITY-ST-ZIP Change Addit ME DELETE 5.1 TITLE Change Addit ME DELETE 5.1 TITLE Change Addit ME DELETE 5.1 TITLE Change Addit ME 5.3 STREET ADDRESS 5.3 STREET ADDRESS Y-ST-ZIP Change Addit LE DELETE 6.1 TITLE Change Addit ME STREET ADDRESS 5.3 STREET ADDRESS Y-ST-ZIP Change Addit LE DELETE 6.1 TITLE 6.3 STREET ADDRESS	office or reagent. La GNATURE	egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or printed name of registered ag OFFICERS AN SD JONES, LINDA F 1329 16TH STREET PANAMA CITY FL TD COLE, QUEEN E	ent and ville it applicable. (NC ID DIRECTORS	tes, the above-named con authorized by the corpora lorida Statutes. TE: Registered Agent signature requ 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME	ation's board of directors. I hereby acce	Durpose of changing in put the appointment as DATE CERS AND DIRECTOR	ts registered registered RS IN 12
REET ADDRESS 135 AUDREY CIRCLE NW 3.3 STRET ADDRESS IY-ST-ZIP 3.4 CITY-ST-ZIP ILE DELETE 4.1 TITLE ME 4.2 NAME REET ADDRESS 4.3 STREET ADDRESS IV-ST-ZIP 4.4 CITY-ST-ZIP ME 5.1 TITLE ME DELETE STREET ADDRESS 4.4 CITY-ST-ZIP ME DELETE ME 5.1 TITLE ME 5.3 STREET ADDRESS IV-ST-ZIP 5.4 CITY-ST-ZIP LE DELETE ME 6.1 TITLE ME 6.2 NAME REET ADDRESS 5.3 STREET ADDRESS IV-ST-ZIP 5.4 CITY-ST-ZIP LE DELETE ME 6.2 NAME 6.3 STREET ADDRESS 6.3 STREET ADDRESS IV-ST-ZIP 6.1 TITLE LE DELETE ME 6.2 NAME 6.3 STREET ADDRESS 6.3 STREET ADDRESS IV-ST-ZIP 6.4 CITY-ST-ZIP LE 0 ELETE 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS	office or reagent. Lai GNATURE	egistered agent, or both, in the State m familiar with, and accept the oblig OFFICERS AN SD JONES, LINDA F 1329 16TH STREET PANAMA CITY FL TD COLE, QUEEN E 135 AUDREY CIRCLE NW	ent and ville it applicable. (NC ID DIRECTORS	tes, the above-named con authorized by the corpora lorida Statutes. TE: Registered Agent signature requires 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS	ation's board of directors. I hereby acce	Durpose of changing in put the appointment as DATE CERS AND DIRECTOR	ts registered registered RS IN 12
Image: Stripping of the second stripping of the	office or reagent. Lai IgNATURE	egistered agent, or both, in the State m familiar with, and accept the oblig OFFICERS AN SD JONES, LINDA F 1329 16TH STREET PANAMA CITY FL TD COLE, QUEEN E 135 AUDREY CIRCLE NW ET. WALTON BEACH FL	a of Florida. Such change was lations of, Section 617.0503, F ent and tile (Lapplicable. (NC ID DIRECTORS	tes, the above-named con authorized by the corpora lorida Statutes. TE: Registered Agent signature requires 13. 1.1 TITLE 1.2 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	ation's board of directors. I hereby acce	DATE	ts registered
ILE DELETE 4.1 TITLE IME 4.2 NAME REET ADDRESS 4.3 STREET ADDRESS TY-ST-ZIP 4.4 CITY-ST-ZIP ILE DELETE S.1 TITLE Change Addit MRE S.2 NAME S.3 STREET ADDRESS TY-ST-ZIP MRE DELETE S.1 TITLE DELETE S.1 TITLE DELETE S.3 STREET ADDRESS TY-ST-ZIP NE DELETE 6.1 TITLE Change Addit Addit ME REET ADDRESS TY-ST-ZIP Addit Addit Addit S.3 STREET ADDRESS TY-ST-ZIP Addit Addit Addit S.3 STREET ADDRESS TY-ST-ZIP AL do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(I). Florida Statutes, I further certify that the	office or reagent. Lai agent. Lai IGNATURE	egistered agent, or both, in the State m familiar with, and accept the oblig OFFICERS AN SD JONES, LINDA F 1329 16TH STREET PANAMA CITY FL TD COLE, OUEEN E 135 AUDREY CIRCLE NW ET. WALTON BEACH FL PD COLE, BENNIE	a of Florida. Such change was lations of, Section 617.0503, F ent and tile (Lapplicable. (NC ID DIRECTORS	tes, the above-named con authorized by the corpora lorida Statutes. TE: Registered Agent signature requires 13. 1.1 TITLE 1.2 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	ation's board of directors. I hereby acce	DATE	ts registered registered RS IN 12 Addition
ME 4.2 NAME REET ADDRESS 4.3 STREET ADDRESS TY-ST-ZIP 4.4 CITY-ST-ZIP ILE DELETE S.3 STREET ADDRESS 5.3 STREET ADDRESS TY-ST-ZIP 5.4 CITY-ST-ZIP REET ADDRESS 5.3 STREET ADDRESS TY-ST-ZIP 5.4 CITY-ST-ZIP REET ADDRESS 5.3 STREET ADDRESS TY-ST-ZIP 5.4 CITY-ST-ZIP REET ADDRESS 6.1 TITLE ME DELETE 6.1 TITLE Change Addit 6.2 NAME 6.3 STREET ADDRESS 6.3 STREET ADDRESS TY-ST-ZIP 6.4 CITY-ST-ZIP A Lob bereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(I). Florida Statutes, I further certify that the	office or reagent. Lai agent. Lai (GNATURE	egistered agent, or both, in the State m familiar with, and accept the oblig OFFICERS AN SD JONES, LINDA F 1329 16TH STREET PANAMA CITY FL TD COLE, OUGEN E 135 AUDREY CIRCLE NW ET, WALTON BEACH FL PD COLE, BENNIE 135 AUDREY CIRCLE NW	a of Florida. Such change was lations of, Section 617.0503, F ent and tile (Lapplicable. (NC ID DIRECTORS	tes, the above-named con authorized by the corpora lorida Statutes. TE: Registered Agent signature required 13. 1.1 TITLE 1.2 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	ation's board of directors. I hereby acce	DATE	ts registered registered RS IN 12 Addition
REET ADDRESS 4.3 STREET ADDRESS IVY-ST-ZIP 4.4 CITY-ST-ZIP ILE DELETE ST TITLE Change ME 5.3 STREET ADDRESS IVY-ST-ZIP 5.4 CITY-ST-ZIP ILE DELETE STREET ADDRESS 5.3 STREET ADDRESS IVY-ST-ZIP 5.4 CITY-ST-ZIP ILE DELETE ME 6.1 TITLE ME 6.3 STREET ADDRESS IV-ST-ZIP 6.4 CITY-ST-ZIP ILE DELETE 6.3 STREET ADDRESS IV-ST-ZIP 6.4 CITY-ST-ZIP	office or reagent. Lai GNATURE	egistered agent, or both, in the State m familiar with, and accept the oblig OFFICERS AN SD JONES, LINDA F 1329 16TH STREET PANAMA CITY FL TD COLE, OUGEN E 135 AUDREY CIRCLE NW ET, WALTON BEACH FL PD COLE, BENNIE 135 AUDREY CIRCLE NW	a of Florida. Such change was lations of, Section 617.0503, F ent and tile it explicable. (NC ID DIRECTORS DELETE DELETE DELETE	tes, the above-named con authorized by the corpora lorida Statutes. TE: Registered Agent signature requires 13. 1.1 TITLE 1.2 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	ation's board of directors. I hereby acce	DATE DATE CERS AND DIRECTOF CERS AND DIRECTOF Change Change	Is registered registered RS IN 12 Addition
IV-ST-ZIP 44 CITY-ST-ZIP LE DELETE 5.1 TITLE ME 5.2 NAME REET ADDRESS 5.3 STREET ADDRESS IV-ST-ZIP 5.4 CITY-ST-ZIP LE DELETE 6.1 TITLE ME 6.2 NAME REET ADDRESS 6.3 STREET ADDRESS IV-ST-ZIP 6.1 TITLE LE DELETE ME 6.3 STREET ADDRESS IV-ST-ZIP 6.3 STREET ADDRESS IV-ST-ZIP 6.4 CITY-ST-ZIP LE DELETE 6.3 STREET ADDRESS 6.3 STREET ADDRESS IV-ST-ZIP 6.4 CITY-ST-ZIP L do bereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(I). Florida Statutes, L further certify that the	office or r agent. I a GNATURE _	egistered agent, or both, in the State m familiar with, and accept the oblig OFFICERS AN SD JONES, LINDA F 1329 16TH STREET PANAMA CITY FL TD COLE, OUGEN E 135 AUDREY CIRCLE NW ET, WALTON BEACH FL PD COLE, BENNIE 135 AUDREY CIRCLE NW	a of Florida. Such change was lations of, Section 617.0503, F ent and tile it explicable. (NC ID DIRECTORS DELETE DELETE DELETE	tes, the above-named con authorized by the corpora lorida Statutes. TE: Registered Agent signature req 13, 1.1 TITLE 1.2 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	ation's board of directors. I hereby acce	DATE DATE CERS AND DIRECTOF CERS AND DIRECTOF Change Change	Is registered registered RS IN 12 Addition
LE DELETE 5.1 TITLE Change Addit ME 5.2 NAME 5.3 STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP Change Addit LE DELETE 6.1 TITLE Change Addit ME BEET ADDRESS 6.3 STREET ADDRESS Change Addit IV-ST - ZIP 6.3 STREET ADDRESS 6.3 STREET ADDRESS Change Addit IV-ST - ZIP 6.4 CITY - ST - ZIP Change Addit	office or reagent. La GINATURE	egistered agent, or both, in the State m familiar with, and accept the oblig OFFICERS AN SD JONES, LINDA F 1329 16TH STREET PANAMA CITY FL TD COLE, OUGEN E 135 AUDREY CIRCLE NW ET, WALTON BEACH FL PD COLE, BENNIE 135 AUDREY CIRCLE NW	a of Florida. Such change was lations of, Section 617.0503, F ent and tile it explicable. (NC ID DIRECTORS DELETE DELETE DELETE	tes, the above-named con authorized by the corpora lorida Statutes. TE: Registered Agent signature req 13 , 1.1 TITLE 1.2 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	ation's board of directors. I hereby acce	DATE DATE DATE CERS AND DIRECTOF Change Change Change Change	Is registered registered RS IN 12 Addition
ME 5.2 NAME REET ADDRESS 5.3 STREET ADDRESS IY-ST-ZIP 5.4 C(TY-ST-ZIP) LE DELETE 6.1 TiTLE Change ME 6.2 NAME REET ADDRESS 6.3 STREET ADDRESS IY-ST-ZIP 6.3 STREET ADDRESS IV-ST-ZIP 6.3 STREET ADDRESS IV-ST-ZIP 6.4 C(TY-ST-ZIP) IL do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes, I further certify that the	office or reagent. La GINATURE	egistered agent, or both, in the State m familiar with, and accept the oblig OFFICERS AN SD JONES, LINDA F 1329 16TH STREET PANAMA CITY FL TD COLE, OUGEN E 135 AUDREY CIRCLE NW ET, WALTON BEACH FL PD COLE, BENNIE 135 AUDREY CIRCLE NW	a of Florida. Such change was lations of, Section 617.0503, F ent and tile it explicable. (NC ID DIRECTORS DELETE DELETE DELETE	tes, the above-named con authorized by the corpora lorida Statutes. TE: Registered Agent signature req 13 . 1.1 TITLE 1.2 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	ation's board of directors. I hereby acce	DATE DATE DATE CERS AND DIRECTOF Change Change Change Change	Is registered registered RS IN 12 Addition
REET ADDRESS 5.3 STREET ADDRESS Y-ST-ZIP 5.4 C(TY - ST-ZIP LE DELETE 6.1 TiTLE Change Addit ME 6.2 NAME 6.3 STREET ADDRESS Addit SEET ADDRESS 6.3 STREET ADDRESS 6.4 C(TY - ST-ZIP) Image Addit L do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes, I further certify that the Image Imag	office or reagent. La GNATURE _ LE ME SEET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP	egistered agent, or both, in the State m familiar with, and accept the oblig OFFICERS AN SD JONES, LINDA F 1329 16TH STREET PANAMA CITY FL TD COLE, OUGEN E 135 AUDREY CIRCLE NW ET, WALTON BEACH FL PD COLE, BENNIE 135 AUDREY CIRCLE NW	a of Florida. Such change was lations of, Section 617.0503, F ent and the it explicable. (NC ID DIRECTORS DELETE DELETE DELETE DELETE	tes, the above-named con authorized by the corpora lorida Statutes. TE: Registered Agent signature req 13 , 1.1 TITLE 1.2 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 4.4 CITY-ST-ZIP	ation's board of directors. I hereby acce		Is registered registered RS IN 12 Addition
Y-ST-ZIP 5.4 C TY-ST-ZIP LE DELETE ME 6.1 TifLE ME 6.2 NAME 6.3 STREET ADDRESS Y-ST-ZIP 6.4 C TY-ST-ZIP 6.1 UfLE 1.1 UfLE 1.1 UfLE 6.3 STREET ADDRESS Y-ST-ZIP 6.4 C TY-ST-ZIP	office or r agent. I a GNATURE _	egistered agent, or both, in the State m familiar with, and accept the oblig OFFICERS AN SD JONES, LINDA F 1329 16TH STREET PANAMA CITY FL TD COLE, OUGEN E 135 AUDREY CIRCLE NW ET, WALTON BEACH FL PD COLE, BENNIE 135 AUDREY CIRCLE NW	a of Florida. Such change was lations of, Section 617.0503, F ent and the it explicable. (NC ID DIRECTORS DELETE DELETE DELETE DELETE	tes, the above-named con authorized by the corpora lorida Statutes. TE: Registered Agent signature req 13 . 1.1 TITLE 1.2 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 4.4 CITY-ST-ZIP 5.1 TITLE	ation's board of directors. I hereby acce		Is registered registered RS IN 12 Addition
LE DELETE 6.1 TITLE 6.1 TITLE Change Addit ME 62 NAME REET ADDRESS IV-ST-ZIP L do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes, Liuther certify that the	office or reagent. La GNATURE	egistered agent, or both, in the State m familiar with, and accept the oblig OFFICERS AN SD JONES, LINDA F 1329 16TH STREET PANAMA CITY FL TD COLE, OUGEN E 135 AUDREY CIRCLE NW ET, WALTON BEACH FL PD COLE, BENNIE 135 AUDREY CIRCLE NW	a of Florida. Such change was lations of, Section 617.0503, F ent and the it explicable. (NC ID DIRECTORS DELETE DELETE DELETE DELETE	tes, the above-named con authorized by the corpora lorida Statutes. TE: Registered Agent signature req 13 . 1.1 TITLE 1.2 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 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME	ation's board of directors. I hereby acce		Is registered registered RS IN 12 Addition
ME 62 NAME REET ADDRESS TY-ST-ZIP 4 do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes, I further certify that the	office or reagent. Lai IgNATURE	egistered agent, or both, in the State m familiar with, and accept the oblig OFFICERS AN SD JONES, LINDA F 1329 16TH STREET PANAMA CITY FL TD COLE, OUGEN E 135 AUDREY CIRCLE NW ET, WALTON BEACH FL PD COLE, BENNIE 135 AUDREY CIRCLE NW	a of Florida. Such change was lations of, Section 617.0503, F ent and the it explicable. (NC ID DIRECTORS DELETE DELETE DELETE DELETE	tes, the above-named con authorized by the corpora lorida Statutes. TE: Registered Agent signature req 13. 1.1 TITLE 1.2 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 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS	ation's board of directors. I hereby acce		Is registered registered RS IN 12 Addition
REET ADDRESS 6.3 STREET ADDRESS TY-ST-ZIP 6.4 CITY-ST-ZIP 4 1 do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes, I (urther certify that the	office or r agent. I a IGNATURE _ 2. TLE MME IREET ADDRESS TY-ST-ZIP TLE AME IREET ADDRESS TY-ST-ZIP TLE IREET ADDRESS TY-ST-ZIP TLE IREET ADDRESS TY-ST-ZIP	egistered agent, or both, in the State m familiar with, and accept the oblig OFFICERS AN SD JONES, LINDA F 1329 16TH STREET PANAMA CITY FL TD COLE, OUGEN E 135 AUDREY CIRCLE NW ET, WALTON BEACH FL PD COLE, BENNIE 135 AUDREY CIRCLE NW	a of Florida. Such change was lations of, Section 617.0503, F ent and tile if explicable. (NC ID DIRECTORS DELETE DELETE DELETE DELETE DELETE DELETE	tes, the above-named con authorized by the corpora lorida Statutes. TE: Registered Agent signature req 13 . 1.1 TITLE 1.2 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 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	ation's board of directors. I hereby acce		Is registered registered RS IN 12 Addition Addition Addition Addition
64 CITY-ST-ZIP 64 CITY-ST-ZIP 4 1 do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes, I (urther certify that the	office or r agent. I ar IGNATURE _ 2. 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	egistered agent, or both, in the State m familiar with, and accept the oblig OFFICERS AN SD JONES, LINDA F 1329 16TH STREET PANAMA CITY FL TD COLE, OUGEN E 135 AUDREY CIRCLE NW ET, WALTON BEACH FL PD COLE, BENNIE 135 AUDREY CIRCLE NW	a of Florida. Such change was lations of, Section 617.0503, F ent and tile if explicable. (NC ID DIRECTORS DELETE DELETE DELETE DELETE DELETE DELETE	tes, the above-named con authorized by the corpora lorida Statutes. TE: Registered Agent signature req 13. 1.1 TITLE 1.2 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 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE	ation's board of directors. I hereby acce		ts registered registered RS IN 12 Addition
4 1 do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes, I further certify that the	office or r agent. I ai IGNATURE 2. TLE WME REET ADDRESS TY-ST-ZIP TLE WME WME REET ADDRESS TY-ST-ZIP TLE WME REET ADDRESS TY-ST-ZIP TLE WME	egistered agent, or both, in the State m familiar with, and accept the oblig OFFICERS AN SD JONES, LINDA F 1329 16TH STREET PANAMA CITY FL TD COLE, OUGEN E 135 AUDREY CIRCLE NW ET, WALTON BEACH FL PD COLE, BENNIE 135 AUDREY CIRCLE NW	a of Florida. Such change was lations of, Section 617.0503, F ent and tile if explicable. (NC ID DIRECTORS DELETE DELETE DELETE DELETE DELETE DELETE	Ites, the above-named con authorized by the corpora lorida Statutes. TE: Registered Agent signature req 13. 1.1 TITLE 1.2 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	ation's board of directors. I hereby acce		Is registered registered RS IN 12 Addition Addition Addition Addition
	office or r agent. I ar IGNATURE _ 2. 2. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7.	egistered agent, or both, in the State m familiar with, and accept the oblig OFFICERS AN SD JONES, LINDA F 1329 16TH STREET PANAMA CITY FL TD COLE, OUGEN E 135 AUDREY CIRCLE NW ET, WALTON BEACH FL PD COLE, BENNIE 135 AUDREY CIRCLE NW	a of Florida. Such change was lations of, Section 617.0503, F ent and tile if explicable. (NC ID DIRECTORS DELETE DELETE DELETE DELETE DELETE DELETE	Ites, the above-named con authorized by the corpora lorida Statutes. TE: Registered Agent signature req 13. 1.1 TITLE 1.2 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 4.4 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	ation's board of directors. I hereby acce		Is registered registered RS IN 12 Addition Addition Addition Addition