ED PARTNERSH

DOCUMENT # A0400000591 1. Entity Name



FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

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CORPDIRECT AGENTS, INC. 103 NORTH MERIDIAN STREET TALLAHASSEE, FL 32301 City FL Zip Code 8. The above named cruity automits this distancent for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE: 9. Caphal Contributions as Shown or printed name of registered agent. 10. The above named cruity automits this distancent for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE: 10. The above named cruity automits this distancent for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. 10. The above named cruity automits this distancent for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. 10. The above named cruity automits agent ag	Zip Country Zip			Country		5. Certificate of Status Desired \$8.75 Additional				
CORPOLITECT AGENTS, INC. 103 NORTH MERIDIAN STREET TALLAHASSEE, FL 32301 City FL Zip Code 1. The above named entity submiss this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, it am familiar with, and accept the obigations of registered agent. SIGNATURE: Street Address (P.O. Box Number is Not Acceptable) To Amount of Capital Contributions DATE To Amount of Capital Contributions 10. Amount of Capital Contributions 3. 100,000.00 10. Amount of Capital Contributions as Shown on record. 3. 100,000.00 10. Amount of Capital Contributions as Shown on record. A GENERAL PARTNER THAT IS A BUSINESS SHITTY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form, an amendment must be filled to change a general partner. 12. GENERAL PARTNER INFORMATION 13. ADDRESS CHANGES ONLY DOCUMENT / WARE SIREL ADDRESS CITY-51-2P MIMM, FL 33133 SIREL ADDRESS CITY-51-2P DOCUMENT / WARE SIREL ADDRESS CITY-51-2P SIREL ADD	6. Name and Address of Current Registered Agent				······································					
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the objections of registered agent. SIGNATURE: 8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the objections or registered agent. Page 10. Capital Contributions as Shown on record. 9. Capital Contributions as Shown on record. 9. Capital Contributions in FLORIDA to date. NOTE: General Partners THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filled to change a general partner. 12. GENERAL PARTNER INCOMMATION 13. ADDRESS CHANGES ONLY 9800042015 SIREST AUDRESS CITY-51-2P MAME, STREET AUDRESS CITY-51-2P DOCUMENT / NAME SIREST AUDRESS CITY-51-2P DOCUMENT / STREET AUDRESS CITY-51-2P DOCUMENT / NAME SIREST AUDRESS CITY-51-2P THE PAGE STREET AUDRESS CITY-51-2P DOCUMENT / NAME SIREST AUDRESS CITY-51-2P THE PAGE STREET AUDRESS CITY-51-2P THE P	103 NORTH MERIDIAN STREET									
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