DOCUM 1: - Entity Name		# A9900	0000164	3				
•		ERVICES LTD, NO. 3					CHED	
							FILED	
Principal Place of Business 7575 DR. PHILLIPS BLVD #270 ORLANDO FL 32819			Mailing Address 7575 DR. PHILLIPS BLVD #270 ORLANDO FL 32819			O LAPR 26 PM 3: 53 SECRETARY OF STATE LUCTURE AND THE CONTROL OF STATE		
2. Principal Pla	ace of Busin	ess	3. Mailing Addre	ess	~		DO NOT WRITE IN THIS SPACE	
Suite, Apt. #	#, etc.	<del></del>	Suite, Apt. #, etc.					
City & State	9		City & State		<del></del>	4. F	El Number 59-3605917 Applied For Not Applied	
Zip		Country	Zip	Cour	ntry	5.	Certificate of Status Desired Securificate of Status Desired Fee Required	
	6. Name	and Address of Curren	t Registered Agent			7, N	ame and Address of New Registered Agent	
JOSEPH, F.	LARRY				<u> </u>		ox Number is Not Acceptable)	
8500 FULTO		•					ze care LANE	
ORLANDO FL 32835								
3. The above r	named entity	submits this statement f	or the purpose of cha	inging its r∋gister	City OR	LANO		
SIGNATURE		submits this statement f			City OR	LANC tered age	TL Zip Code 328/9	
SIGNATURE _	Signature, typed o ntributions in record.	or printed name of registered agen \$12,000.00	t and little if applicable.  10. Amount in FLOF	(NOTE: Registere t of Capital Contri RIDA to dai 3.	City OR red office or registed Agent algorature requirements of the control of th	tered age	TL Zip Code 328/9  Int, or both, in the State of Florida.  DATE  DATE  11. MAKE CHECK PAYABLE TO DEPT. OF STATE OF SERVERSE SIDE FOR FEE INFORMATION	
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