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2. I 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 information	AME TREET ADDRESS	DRIESSEN, DAWN M ONE ROCKEFELLER PLACE SU		NAME STREET ADDRESS	Change Addit	ion
2. Thereby class the information supplement with this hind does not qualify to the exception stated in section responses (1), nonda statutes, name of the indicated on this report or supplements is true and accurate and that my signature shall have the same legal effect as if made under outh; that I am an officer or indicated on the corporation or the receiver or these empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 changed, or on an attachment with all address, with all other like empowered.	 I hereby c indicated of the corr changed, 	certify that the information supplied wit on this report or supplemental report in poration or the receiver or trustee emp or on an attachment with address,	h this filing does not qualify for s true and accurate and that i owered to execute this report with all other like empowered	r the exemption stated in my signature shall have th as required by Chapter 6	Section 119.07(3)(i), Florida Statutes. I further certify that the information e same legal effect as if made under oath; that I am an officer or directo 07, Florida Statutes; and that my name appears in Block 10 or Block 11	r if