DOCUMENT # F10214 1. Entity Name						FILED			
OURWAY, INC.						02 NOV 15 PM 4: 42			2
Principal Plac	ce of Business		Mailing Address			الله (ف] TEA 1	LUNETARY LAHASSE	OF STAI	E Di A
9735 SW 73F MIAMI FL 331			721 N.W. 134TH PLACE MIAMI FL 33182			700 300 300	LANASSE	.E, FLORI	9
2. Principal F	Place of Business		3. Mailing Address						
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Suite Apt	: #, etc.		Suite, Apt. #, etc.			4F3. DO NO	T WRITE IN THE	S SPACE	
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Zip	Cor	untry	Zip	Country	5.	. Certificate of Status De	sired 🚺	\$8.75 Ad	
	6. Name and A	Address of Current Re	gistered Agent	Manage	7.	Name and Address of	New Registere	d Agent	
AI \/ADE7	, MIGUEL M	New	uadhese	Name					
	., MIGUEL M	் அடு Minuel	Alvarez	Street A	ddress (P.O.	. Box Number is Not Acc	eptable)		
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	131. AL D								· · · · · · · · · · · · · · · · · · ·
			, Florida 33182	City			E	Zip Cod	le
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13. Thereby 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 indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR