FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

		DIVISION	OF CORPOR	RATIONS				
MENT #	F28709) (6	····					
LITY PLASTERIN	NG COMPANY	`	•					
of Business								
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						Qualified	3a. Date of Last	Report
ace of Business		2a. Mailing Address		774	04/07/1981 4. EEL Number		08/22	T
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F, OIC.	-	·1					□ \$8.7	5 Additional
							Fee	Required
							□ \$5.0	00 May Be led to Fees
<u></u>	´ -	 Ση	F	ntry	8. This corporation has li	ability for in	tangible tax under	s 199.032.
	ress of Current Re	gistered Agent	30]		Florida Statutes	Yes	□ No	
		<u> </u>		81 Name	TU. Name and Address	of New Re	gistered Agent	
ROOK, H. LEON, III	l		}	R2 Stroot Ada	kono /D.O. Do. N	,		
NDEPENDENT SQL	JARE				ress (P.O. Box Number is Not .	Acceptable	2)	
SONVILLE FL 32202	2			83				
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the provisions of Sec	tions 607 0502 and	ROT 1500 Charles Out		i			FL °° 4	ip code
	COLO DOLLODOSE GILIOLI	oor, roog, rigilda Sialli	ites, the above	e named como	ration automita this state.	 		
id agent, or both, in th i, and accept the oblig	ie State of Florida Su gations of, Section 60	uch change was authori 07.0505, Florida Statute	otes, the above ized by the co es	ve named corpo orporation's boa	ration submits this statement fo and of directors. I hereby accept	or the purpor t the appoir	ose of changing its	registered office d agent. I am
						or the purpo t the appoir	ose of changing its nument as registere	registered office d agent. I am
gnature, typed or printed name	e of registered agent and title	citapplicación (N	OTE: Registered /	ve named corpo orporation's boa Againt signature require	od where reinstating)		DATE	
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appears in Block 12 or Block 13 if chy ged, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

904-282-0166 Dayline Prone 1