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64 CITY-ST-ZIP 64 CITY-ST-ZIP 64 CITY-ST-ZIP 64 CITY-ST-ZIP 100 horeby certily 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 indicates on this annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that have the same legal effect as if made under oath; that my signature shall have the same legal effect as if made under oath; that have the same legal effect as if made under oath; that my signature shall have the same legal effect as if made under oath; that my signature shall have the same legal effect as if made under oath; that my signature shall have the same legal effect as if made under oath; that my signature shall have the same legal effect as if made under oath; that my signature shall have the same legal effect as if made under oath; that my signature shall have the same legal effect as if made under oath; that my signature shall have the same legal effect as if made under oath; that my signature shall have the same legal effect as if made under oath; that my signature shall have the same legal effect as if made under oath; that my signature shall have the same legal effect as if made under oath; that my signature shall have the same legal effect as if made under oath; that my signature shall have the same legal effect as if made under oath; that my signature shall have the same legal effect as if made under oath; that my signature shall have the same legal effect as if made under oath; that my signature shall have the same legal effect as if made under oath; that my signature shall have the same legal effect as if made under oath; that my signature shall have the same legal effect as if made under oath; that my signature shall have the same legal effect as if made under oath; that my signature shall have the same legal effect as if made under oath; that my signature shall have the same legal effect as if made under oath; t	office or registeried agent, or both, is the agent 1 am familiar with, and accept the source proceedent of the original office offic	State of Florida obligations of S and agent and life II a S AND DIRECT(Such change was a lection 607.0505, Fit (NOT DRS	es, the above-named corp authorized by the corporal oricla Statutes. E: Bogistered Agent signature regal 13. 1 I TITLE 1 2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2 I TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE	tion's board of directors. I hereby acce	FL purpose of changing it purpose of changing it purpose of change DATE CERS AND DIRECTOF Change	IS registered registered IS IN 12 Addition
information indicates on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that the officer or director of the American or the experimental annual report is true empowered to execute this report as required by Charter (07 Elocida Statutes; and that my name	office or registeried agent, or both, in the agent 1 am familiar with, and accept the source of resolution of the source of resolution of the source of the	State of Florida obligations of S and agent and life II a S AND DIRECT(Such change was a lection 607.0505, Fit (NOT DRS	es, the above-named corp authorized by the corporal oricla Statutes. E: Bogistered Agent signature regal 13. 1 1 TITLE 1 2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2 1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3 1 TITLE 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME	tion's board of directors. I hereby acce	FL purpose of changing it purpose of changing it purpose of change DATE CERS AND DIRECTOF Change	IS registered registered IS IN 12 Addition
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