SECOND NO	TICE: CORPOR	IATION WILL BE I	DISSOLVE	D ON OR AL	FTER AU	GUS REIN	ST 9, 1095						24 (1942) 24 (1942)	
PROFIT FLORIDA DEPARTME								j '	e de la seconomica de la composición d La composición de la	***	*· =			
CORPORATION Sandra B. I									SECRET/	TILED VRY OF S	TATE			
Secretary							NS.		' DIVISION C	F CORPOR	ATIONS			ı
										5 PM	2: 01			
DOCUMENT # F54518 (8)									JU 20 1	J 11 12	5 5 I			
CHRISTIAN D. KEEDY, P.A.														
		.,						l						
Principal Place	e of Business		Mailing A	Address				┨						
201 S BISCAYNE BLVD STE 2400 201 S BISCAYNE BLVD STE 2400														
MIAMI FL 33131 MIAMI FL 33131								DO NOT WRITE IN THIS SPACE.						
								3.	Date incorporated of 12/04/1981	or Qualified	3a. Date	of Last Re 9/1994	port	
Principal Place of Business							-		FEI Number		00/2		polied For	\dashv
Suite, Apt.	# atc	,-	28					ـ	59-2146069				lot Applicable Additional	4
22 Sulle, Apr.	-, GtG.	Suite, Apt. #, etc.					5.	Certificate of Status	Desired			Additional equired		
City & State	8		⊢ '	& State		_		6.	Election Campaign	_	П		May Be	٦
23 Zip		Country	26 Zp		Cou	ntry		8.	This corporation has	s liability for in	tangible tax		to Fees 199.032,	7
24	25	Address of Courses F	29	A	30				Florida Statutes	Yes	No.			4
	9. Name end	Address of Current F	registerea	Agent		81	Name	10.	Name and Addres	S OI NOW HE	gistered A	gent		┪
KEEDY, CHRISTIAN D.						82 Street Addre			O. Box Number is N	ot Acceptable)			-
201 S BISCAYNE BLVD STE 2400						83								\dashv
MIAMI FL 33131						84	City					lee Ze	Code	4
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the							City				FL			_
or register	ed agent, or both,	f Sections 607.0502 ar in the State of Florida. obligations of, Section	Such chang	ge was authorize	ed by the c	orpo ve-na	med corporat ration's board	ion si	ubmits this statemen ectors. I hereby acc	it for the purp ept the appoi	ose of chan ntment as r	ging its re egistered a	gistered office agent. I am	3
SIGNATURE	ш, ала ассерт ию	ooligations of, Section	1 007 .0303,	riorida Statutes.										
12.	Signature, typod or previ	od name of registered agent and OFFICERS AND D			TE Registerno	Agont	signature required w		nstatingi ADDITIONS/CHANG	ES TO OFFIC	DATE LERS AND F	DIBECTOR	IS IN 12	- -
TITLE	DPS			1 1 11							[Change	Addition	- 8
NAME STREET ADDRESS	KEEDY, CHRIS	stian d So biscayne bly	Vn		12 NAME 13 STREET ADDRESS									25
CITY - ST - ZIP	MIAMI FL 99	00 0100/11112 02		135: 14 Ci			l.							12
MILE					2 1 TIT							Change	Addition	٦
NAME STREET ADORESS						22 NAME 23 STREET ADDRESS								
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STREET ADDRESS							ADDRESS							
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TITLE NAME					4 1 TIT 4 2 RA						L	Change		
STREET ADDRESS							DDRESS							
CITY - ST - ZIP					44 CIT		· Z(P			_	<u>1</u>	Change	Addition	-
HAME					52100						_			
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CITY - ST - ZIP TITLE					5 4 CII		ZIP					Change	Addition	,-
HAME					. 62 IW	ME								
STREET ADDRESS CITY - ST - 7IP			_		63 STF 6.4-017	-	DORESS	_						
	y certify that the in	formation supplied with	n this illing	voluntarily furti				tho o	xemption stated in S	Action 119.0	7(3)(k), Flork	ta Statutor	s. I further	1
outh; that appoins in	t am an officer ord Block 12 or Block	formation supplied with glented on this annual director of the corporat < 13 if changed, or on a	ion or the re an altackme	Colvor or kruston ont will an adder	ar reportat i ompowere iss.	od to	oxochin kija L	roport	ne required by Chap	ptor 007, Flor	ida Statutos	; and that	my name	
	((1	(//		سي	XI_	/	2/12	185 8	65-3°	72-2	425	
SIGNAT	UHE:	HATURE AND TYPED OR PE	MILEO HAME C	OF BIDNING OF (ICE)	1 ON MILEOT	or	vy		V 04			ne Novi e		
				<u>/</u>					<u> </u>					⅃