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chick or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered adjust a state with and accept the oblightions of Scotton 607 0505, Fordrad Statutes NATURE Second Land Head with and accept the oblightions of Scotton 607 0505, Fordrad Statutes NATURE Second Land Head With and Accept the oblightions of Scotton 607 0505, Fordrad Statutes NATURE Second Land Head With and Accept the oblightions of Scotton 607 0505, Fordrad Statutes NATURE Second Land Head With and Accept the oblightions of Scotton 607 0505, Fordrad Statutes NATURE Second Land Head With and Accept the oblightions of Scotton 607 0505, Fordrad Statutes NATURE Second Land Head With the Information supplied with this figing does not qualify for the exemption Stated in Section 119 07(3)(0, Fordrad Statutes, Lowfree certify that the Information supplied with this figing does not qualify for the exemption stated in Section 119 07(3)(0, Fordrad Statutes, Lowfree certify that the Information supplied with this figing does not qualify for the exemption stated in Section 119 07(3)(0, Fordrad Statutes, Lowfree certify that the Information supplied with this figing does not qualify for the exemption stated in Section 119 07(3)(0, Fordrad Statutes, Lowfree certify that the Information supplied with this figing does not qualify for the exemption stated in Section 119 07(3)(0, Fordrad Statutes, Lowfree certify that the Information supplied with this figing does not qualify for the exemption stated in Section 119 07(3)(0, Fordrad Statutes, Lowfree certify that the Information supplied with this figing does not qualify for the exemption stated in Section 119 07(3)(0, Fordrad Statutes, Lowfree certify that the Information supplied with this figing does not qualify for the exemption stated in Section 119 07(3)(0, Fordrad Statutes, Lowfree certify that the Information supplied with this figing does not qualify for the exemption stated in Sec					84 City		(85 Zi)	o Code
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