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PAMI-FL	. 20 INC						
Principal Plac	e of Business	Mailing Address					
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2. Principal P	Nace of Business	3. Mailing Address		\neg			
3 World Financial Center 101 Hudson Street			et		DO NOT W	RITE IN THIS SE	3405
Suite, Apt.	#, etc.	39th, Floor_		l	DO NOT W	KH CIN THIS OF	ACE
City & State	Ð	City & State		4. FE	Number 10	27/1/11	Applied For
New York		Jersey City, NJ	Countries	Per	nding 13-409	11990	Not Applicable
Zip 10285	Country	Zip - 07302	Country	5. Ca	artificate of Status Dosin	ed 🔲 - 😽	8.75 Additional Se Required
	8. Name and Address of Current			7. Na	me and Address of Ne		
			Name				
Corporat	tion Service Company		Street Add	ress (P.O. B	Box Number is Not Acce	eptable)	
1201 Hay	•		———				
Suite 105			City	City Zip Code			
Tallahassee, FL 32301 8. The above named entity submits this statement for the purpose of changing its				PL PL			
	Signature, typed or printed name of regis	ile FILE NOWI	II FEE IS \$150.00	•	The ture required when reins		
9. This corpor	Signature, typed or printed name of regis ration is eligible to satisfy its Intangible quirement and elects to do so.	ile FILE NOWI	II FEE IS \$150.00 00 Fee will be \$55	0.00	10. Election Campaign Trust Fund Contrib	Financing	\$5.00 May Be Added to Fees
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