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1998

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FLORIDA DEPARTMENT O

Sandra B. Mortham

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Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H23609

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	ice of Business	Mailing Address			,		.,, .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
16141 OLD P.O. BOX 0		PO BOX 60953 P.O. BOX 06953			1				
FT MYERS FL 33912		FT. MYERS FL 33908				DO NOT WRITE IN THIS SPACE			
US		U\$			3. Date incorporat	ed or Qualified			
Dringing!	Place of Business	On Mallion Address			10/02/1984				
z. Principal	Flace of Business	2s. Mailing Address			4. FEI Number	.7		- ·	oplied For of Applicab
Suite, Ap	t. #. etc.	Suite, Apt. #, etc.	·		59-245440				Additional
2		27			5. Certificate of Sta	atus Desired		Fee Re	
City & Sta	ate	City & State			6. Election Campa	ign Financing		\$5.00	May Be
<u> </u>		28			Trust Fund Cont	tribution		Added	
Zip ¬	Country	Zip	Country	•	8. This corporation				
<u>. </u>	9. Name and Address of Cui	29	30		Personal Proper				_ No
		Leur vedisteled Maur	81	Name	10, Name and Add	res of New A	egistered A	Beur	
	EWELL, R.E.			L					
16141 OLD U.S. 41 FT. Myers FL 33912			82	Street A	reet Address (P.O. Box Number is Not Acceptable)				
r	I. MIENS FL 33912		83						
								,,	
			64	City			FL	85 Zip	Code
1. Pursuan	t to the provisions of Sections 607, registered agent, or both, in the St am familiar with, and accept the of	0502 and 607.1508, Florida Statut	es, the above	e-named o	corporation submits this sta	atement for the		changing it	s registere
agent. I									
SIGNATURE	Signature, typed or printed name of registered	agent and title if applicable (NOT AND DIRECTORS	F: Registered Age	eni signature r	equired when reinstating) ADDITIONS/CHA	NGES TO OFFI	DATE CERS AND	DIRECTOR	RS IN 12
SIGNATURE	Signature, typed or printed name of registered			eni signature (equired when reinstating) ADDITIONS/CHA	NGES TO OFFI	CERS AND	DIRECTOR Change	
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