SIGNATURE:

DOCU	IMENT # H3	31898	•	~ ,				F	ILED		
-	FLORIDA, INC.		~								
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Principal Pla	ce of Business		Mailing Address		·			SECRETA	RY OF S	TATE	
67 S GULPH ROAD			367 S GULPH ROAD				SECRETARY OF STATE TALLAHASSEE, FLORIDA				
o box 61558 Ing of Prus	SIA PA 19406-0958		PO BOX 61558 KING OF PRUSSIA PA 194	D6-0958							
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. Principal Place of Business			3. Mailing Address								
Suite, Apt	. #, etc.		Suite, Apt. #, etc. City & State				DO NOT WRITE IN THIS SPACE				
City & Sta	te					4. F	El Number	02-02040	04	I IA	applied For
Zip	Country		Zip	Coun	tn.			23-23248			lot Applicable
				Coun	ili y			Status Desired		\$8.75 Ac Fee Requir	
	6. Name and Addre	ess of Current Re	gistered Agent		Name	7. N	lame and A	ddress of Nev	v Registered	Agent	
	CORPORATION SYSTE				Street Address	nec (D O D	ov Number	is Not Assess	,blo)		
) S. PINE ISLAND ROA NTATION FL 33324	AD			Sileet Addre	:00 (F.U. B	ox number	is Not Accepta	ibie)		
FLAI	11/ATION 1 L 33324									·	
					City				FL	L Zip Cod	de
8. The above	e named entity submits th	nis statement for th	ne purpose of changing it	s registere	ed office or regi	istered age	ent, or both,	in the State of	Florida.		
8. The above								in the State of			
SIGNATURE	Signature, typed or printed name	e of registered agent and	title if applicable. (NO	TE: Registered	d Agent signature req			in the State of	Florida.		
SIGNATURE 9. This corporate fax filing	Signature, typed or printed name oration is eligible to satis: requirement and elects to	e of registered agent and fy its Intangible o do so.	FILE NOW After MAY 1, 2	TE: Registered	d Agent signature req IS \$150.00 will be \$550.0	quired when rei	instating) 10. Electi	in the State of	DATE		00 May Be
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