CORP	POFIT		FLORIDA DEPAR Sandra B	TMENT OF	STATE			
	AL REPORT		Secretar DIVISION OF C	y of State	ONS			
	<u>996</u>	<u> </u>	/7\					
orporation N	Name	(39445	(7)					
SANSON	ne galleria ji	eep eagle, inc	•					
pipal Place c	of Business		ail.ng Address				0 0 0 0 0 0 0 0 0	
)3 Northla Ke park fl			900 N FEDERAL HWY Suite 302					
			BOCA RATON FL 33432 US			3. Date Incorporated or Qualified 10/18/1988	3a. Date of Last 03/07/18	
Tincipal Plac	ce of Business	2a. 26	Mailing Address			4. FEI Number 65-0080571		Applied For Not Applicable
Suite, Apt. #	, etc.	20	Suite, Apt. #, etc.			5. Certificate of Status Desired		5 Additional e Required
Dity & State		······	City & State			6. Election Campaign Financing Trust Fund Contribution		00 May Be led to Fees
Zip	Coun	28 itry 29	Zip	Counti	γ	8. This corporation has liability for		
	25 9, Name and Add	ress of Current Regit	stered Agent			10. Name and Address of New		
TEDESCO, ROY S 82 Stree						Iress (P.O. Box Number is Not Accepta	able)	
980 N FE	EDERAL HWY							
SUITE 302				83				Zip Code
BOCA RATON FL 33432				84 City			FL 65	The cone
Pursuant to	o the provisions of Se ed agent, or both, in th	ctions 607.0502 and 60 he State of Florida, Suc	07.1508, Florida Statute h change was authorize	s, the above d by the co	P-named corpo rporation's boa	oration submits this statement for the p ard of directors. I hereby accept the ap	urpose of changing it pointment as register	s registered off ed agent. I am
NATURE		ctions 607.0502 and 60 he State of Florida. Suc gations of, Section 607 he of reprisered agent and state OFFICERS AND DIRE	tapscable (NO 1			oration submits this statement for the p and of directors. I hereby accept the ap red when reinstailing ADDITIONS/CHANGES TO OF	Urpose of changing it pointment as register DATE FICERS AND DIREC	TORS IN 12
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