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26 65-0546592 Not Suite, Apl. #, etc. Suite. Apt. #, etc. 5. Certificate of Status Desired \$8.75 Ac City & State City & State 6. Election Campaign Financing \$5.00 N Zip Zip Country Zip Country 8. This corporation has liability for intengible tax unders. Zip Zip So Finida Statutes Yes Yes Suite, Api, #, etc. S. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent No Suite, Api, #, 23 29 30 Finida Statutes Yes Yes 2 S. UNIVERSITY DR., #319 PLANTATION FL 33324 81 Name Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33324 84 City FL 85 Zip Ca Softice or registered agent, an familiar with, and accept the obligations of. Section 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing His office or registered agent, an familiar with, and accept the obligations of. Section 607.0505, Florida Statutes. Signature registered of diffectors. Thereby accept the obligations of. Section 607.0505, Florida Statutes. GNA1URE Yes along the obligations of. Section 607.0505, Florida Statutes. 13. ADDITIONS/C	Applicab dditional quired May Be o Fees
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