	*25.00 *25.00 GES Applied For Not Applicable
S & H PRIVICIAL OFTICINS LLC         Principal Place of Business         S21 FAA BUVD. #228 PALM BEACH GARDENS FL 3318         S21 FAA BUVD. #228 PALM BEACH GARDENS FL 3318         Suite, Apt. #, etc.         Suite, Apt. #, etc.         City & State         City & State         6. Mame and Address of Current Registered Agent         7. Name and Address of New Registered Agent         7. Name and Address of Current Registered Agent         9. Mail BEACH GARDENS FL 33418         City & State         City & State         8. Mane and Address of Current Registered Agent         HYMANS, BARBARA         4521 FBA BLVD, #228         PALM BEACH GARDENS FL 33418         City         City         Street Address (P.O. Box Number is Not Acceptable)         PALM BEACH GARDENS FL 33418         City         FLE NOW!!!! FFE IS \$50.00         Make Check Payable to Florida Department of State         Delete       Tht#         Name       IDelete         Tht#	GES Applied For Not Applicable
S21 PGA BLVD. #228 PLM BEACH GARDENS FL 33418       \$521 PGA BLVD. #228 PLM BEACH GARDENS FL 33418         2. Principal Pace of Business       1. Matling Address         Suile, Apt. #, etc.       Suile, Apt. #, etc.         City & State       City & State         2.0       Country         2.10       Country         3.11       Scorenificate of Status Desired	GES Applied For Not Applicable
ALLH BEACH GARDENS FL 39/18       PALM BEACH GARDENS FL 39/18         2. Principal Pace of Business       3. Mailing Address         Suite, Apt. #, etc.       Suite, Apt. #, etc.         City & State       Chick King         City & State       Chick King         Zip       Country         3. Mailing Address       Suite, Apt. #, etc.         Zip       Country         4. FEI Number       26 - DOS (444.3         Zip       Country         5. Mame and Address of Current Registered Agent       T. Name and Address of New Registered Agent         HYMANS, BARBARA 4521 PGA BLVD., #228 PALM BEACH GARDENS FL 33418       Street Address (PO. Box Number is Not Acceptable)         PALM BEACH GARDENS FL 33418       Street Address of New Registered Agent         Street Address of registered agent.       FL         The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar the obligations of registered agent.       Dutt         Street Address Street       Intel New State         Make Check Payable to Florida Department of State       Dutt         Due By May 1, 2003       ADDITIONS/CHANGES         Name       Intel New State       Intel New State         Inter Address       Intel New State       Intel Negatered Agent Ag	GES Applied For Not Applicable
Suite, Apt. #, etc.       Suite, Apt. #, etc. <ul> <li>Chy &amp; State</li> <li>Celock HERE IF MAKING CHAN</li> <li>City &amp; State</li> <li>FEI Number</li> <li>Country</li> <li>Zip</li> <li>Country</li> <li>Zip</li> <li>Country</li> <li>Suite, Apt. #, etc.</li> </ul> <ul> <li>FEI Number</li> <li>Celock HERE IF MAKING CHAN</li> <li>City &amp; State</li> <li>FEI Number</li> <li>Country</li> <li>Suite, Apt. #, etc.</li> </ul> Street Address of Country         Zip         Country         Street Address of New Registered Agent           HYMANS, BARBARA 4521 PGA BLVD., #228 PALM BEACH GARDENS FL 33418         Name         Street Address (PO. Box Number is Not Acceptable)           View obligations of registered agent.         City         FL         Zin           Street Address (PO. Box Number is Not Acceptable)         Immediate agent and agent and the purpose of changing its registered office or registered agent, or both, in the State of Florida. Lam familiar the obligations of registered agent.         Differ Not Acceptable)           Street Address (PO. Box Number is Not Acceptable)         Mamediate agent agent and the purpose of changing its registered office or registered agent, or both, in the State of Florida. Lam familiar         Differ Not Acceptable)           Street Address (PO. Box Number of agent agent agent and the purpose of changing its registered agent, or both, in the State of Florida.	GES Applied For Not Applicable
City & State       City & State       4. FEI Number       26 - 005(4443)         Zip       Country       Zip       Store relificate of Status Desired	Applied For Not Applicable
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	Additional
HYMANS, BARBARA 4521 PGA BLVD., #228 PALM BEACH GARDENS FL 33418     Name       City     FL       City     FL       Zip     City       Name     City       City     FL       Zip     City       Street Address (P.O. Box Number is Not Acceptable)       City     FL       Zip     City       Signaum, tobed or privad name of registered agent and the if applicable.     INOTE Registered Agent agent agent agent and the if applicable.       MARE Check Payable to Florida Department of State Due By May 1, 2003     DATE       MARE Check Payable to Florida Department of State Due By May 1, 2003     ADDITIONS/CHANGES       TLE     MARE Check Payable to Florida Department of State Due By May 1, 2003     City       MARE REFERIORDESS     TITLE     MGCLM       NAME     TITLE     MGCLM       TIE     MARE Abat & Abat	
4521 PGA BLVD., #228 PALM BEACH GARDENS FL 33418       Street Address (P.O. Box Number is Not Acceptable)         City       FL       Zin         City       FL       Zin         The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar the obligations of registered agent.       I am familiar         IGNATURE       Signature, typed or protect name of registered agent and title if applicable       (NOTE: Registered Agent: stratement of State Due By May 1, 2003       DME         ME       FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2003       ADDITIONS/CHANCES       Onto SARGARA HYMANSS         ILE       Mee       STRET ADDRESS       IO.       ADDITIONS/CHANCES       Onto SARGARA HYMANSS       Onto SARGARA HYMANSS         IV-S1-2IP       Delete       TITLE       MSRET ADDRESS       STRET ADDRESS       III.         IV-S1-2IP       Delete       TITLE       MSREME SCHUN AGERS       III.       Onto         IV-S1-2IP       Delete       TITLE       MSREME SCHUN AGERS       III.       Onto         IV-S1-2IP       Delete       TITLE       MGR.M.       STRET ADDRESS       III.       Onto         IV-S1-2IP       Delete       TITLE       MGR.M.       SCHUN AGERAL       III.       Onto <td></td>	
The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar the obligations of registered agent.  IGNATURE	
A. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar the obligations of registered agent.     SIGNATURE     Genature, typed or printed name of registered agent and title if applicable.     (NOTE: Registered Agent algonature regulated when reinstating)     DATE     FILE NOW!!! FEE IS \$50.00     Make Check Payable to Florida Department of State     Due By May 1, 2003     MANAGING MEMBERS/MANAGERS     10.     ADDITIONS/CHANGES     TITLE     MARE     TITLE     Delete     TITLE     MARE     Delete     TITLE     MARE     TITLE     MARE     Delete     TITLE     MARE     TITLE     MARE     Delete     TITLE     MARE	Code
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I. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or ma limited liability company of the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.	nge 🗍 Addition
SIGNATURE: 12 Statistic RIBARBARA DAYMANS 4/10/03 561/7.	the information