

Florida Department of State
Division of Corporations
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To: Division of Corporations
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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S. WARREN

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If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
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(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a **delayed effective date**, but not an effective time, at 12:01 a.m. on the earlier of:

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Signature of a member of author

Signature of a member or authorized representative of a member

Gerald Cummings

Typed or printed name of signer

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