32773:5533     USA     S2773:5533 USA     S. Cellinicate O satus Desired     Fee Require       6. Name and Address of Current Registered Agent     7. Name and Address of New Registered Agent     7. Name and Address of New Registered Agent       0:CABURN, DOUGLAS S- 500 N HWY 43+ STE-1- ATLAMONTE SPRINGS FL 02714-     Street Address of New Registered Agent     Street Address of New Registered Agent       0:CABURN, DOUGLAS S- 500 N HWY 43+ STE-1- ATLAMONTE SPRINGS FL 02714-     Street Address of New Registered Agent     Street Address of New Registered Agent       8. The above named entity submits this statement for the purpose of changing its registered Affice or registered agent, or both, in the State of Florida.     FL     Zirus       9. This odoparation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)     FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State     10. Election Campaign Financing Trust Fund Contribution.     Ad       11.     OFFICERS AND DIRECTORS     12.     ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS     Xohn E . EPPARD Store DARD, FL 32773       11.E     D     Trust Fund Scin - WINTER SPRINGS FL     Trust Fund Contribution.     Ad       12.     ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS     ITLE     D/ P/ S SOHNE GED, FL 32773       11.     OFFICERS AND DIRECTORS     ITLE     D/ NP / T     SOHNE GED, FL 32773       11.     OFFICERS AND DIRECTORS     ITLE     D/	ate	FILED Feb 05, 2000 8:00 Secretary of Sta 02-05-2000 90025 003 ***150.0			DO UNIFORM BUSI UMENT # L32578 GROUTING, INC.	<ol> <li>Entity Name</li> </ol>
HORNS GROLE- WINTER GRANGE TL GORG 2022.       YED THOMAG GROLE- WINTER GRANGE TL GORG 2022.       Status Grand Grand Control				Mailing Address	ace of Business	Principal Plac
ISO       WILD WORD       JR       ISO       WILD WORD       JR         Suite, Apt. #, etc.       Suite, Apt. #, etc.       Do NOT WRITE IN THIS SPACE         City & State       Suite, Apt. #, etc.       Do NOT WRITE IN THIS SPACE         Zip       Country       Zip       Suite, Apt. #, etc.         Jak/Ford       FL       State, Apt. #, etc.       State, Apt. #, etc.         City & State       Current       State, Apt. #, etc.       State, Apt. #, etc.         Jak/Ford       Current       State, Apt. #, etc.       State, Apt. #, etc.         State       Current       State, Apt. #, etc.       State, Apt. #, etc.         State       Current       State, Apt. #, etc.       State, Apt. #, etc.         State       Current       State, Apt. #, etc.       State, Apt. #, etc.         State       State, Apt. #, etc.       State, Apt. #, etc.       State, Apt. #, etc.         State       State, Apt. #, etc.       State, Apt. #, etc.       State, Apt. #, etc.         State       State, Apt. #, etc.       State, Apt. #, etc.       State, Apt. #, etc.         State       State, Apt. #, etc.       State, Apt. #, etc.       State, Apt. #, etc.       State, Apt. #, etc.         State       State, Apt. #, etc.       State, Apt. #, etc.		810940	<del>36</del>	1202 THOMAS GIRCLE.	S ORGLE -	4202 THOMAS
SAMFORD       FL       SAMFORD       FL       SP23/8390         Zip       Country       Zip       Country       Signature       Signa		DO NOT WRITE IN THIS SPACE	sood DR	150 WILDU	WILDWOOD DR	150
Zip       Zip       Country       Zip       Signame       S. Certificate of Status Desired       \$8,75         3.277 3: 5538       USA       S. Certificate of Status Desired       Replaced Agent         6. Name and Address of Current Registered Agent       Name       Replaced Agent         0       Name and Address of Current Registered Agent       Name       Street Address (P.O. Box Number is Not Acceptable)         000000000000000000000000000000000000	Applied	El Number 59-2978390	FL	City & State		6: 1-
Name         Schedulin, bouldLAS S- 500 NTHWY 434- SEE 1 ATLAMONTE SPRINGS FL 02714-         Street Address (P.O. Box Number is Not Acceptable) SEE 1 ATLAMONTE SPRINGS FL 02714-         City Automic Street Address (P.O. Box Number is Not Acceptable) SEE 1 ATLAMONTE SPRINGS FL 02714-         City Automic Street Address (P.O. Box Number is Not Acceptable) SEE 1 ATLAMONTE SPRINGS FL 02714-         City Automic Street Address (P.O. Box Number is Not Acceptable) SEE 1 ATLAMONTE SPRINGS FL 02714-         City Automic Street Address (P.O. Box Number is Not Acceptable) SEE 1 ATLAMONTE SPRINGS FL 02714-         City Automic Street Address (P.O. Box Number is Not Acceptable) Section is statement for the purpose of changing its registered agent, or both, in the State of Florida.         Signature registered agent, or both, in the State of Florida.         Signature registered agent, or both, in the State of Florida.         Signature registered agent, or both, in the State of Florida.         Signature registered agent, or both, in the State of Florida.         Signature registered agent, or both, in the State of Florida.         Signature registered agent, or both, in the State of Florida.         Signature registered agent, or both, in the State of Florida.         Signature registered agent, or both, in the State of Florida.         Signature registered agent, or both,	75 Additiona Required	Fee Req		3277 3.5583	Country 7 3.5533 USA	Zip 3277
8. The above named entity submits this statement for the purpose of changing its registered effice or registered agent, or both, in the State of Florida.   SIGNATURE   Signature, typed or printed name of registered egent and title if applighte.   (NOTE: Registered Agent segnature required when reunstating)   OATE   OATE   9. This concorration is eligible to satisfy its Intangible Tax filing requirement and elects to do so.   (See criteria on back)   ITTLE   D-   TITLE   NAME   STREET ADDRESS   CITY-ST-ZIP   WINTER SPRINGS FL-   TITLE   D   NAME   STREET ADDRESS   CITY-ST-ZIP   WINTER SPRINGS FL-   TITLE   D   NAME   STREET ADDRESS   CITY-ST-ZIP   WINTER SPRINGS FL-   TITLE   D   NAME   STREET ADDRESS   CITY-ST-ZIP   WINTER SPRINGS FL   CITY-ST-ZIP   WINTER SPRINGS FL   STREET ADDRESS   CITY-ST-ZIP   STREET ADDRESS   CITY-ST-ZIP   STREET ADDRESS		ox Number is Not Acceptable)	Street Address (		<del>0 N HWY 434-</del> <del>'E 1</del>	- <del>800</del> - STE-
TITLE       D <th>4 - 0 ( \$5.00 Mi Added to F</th> <th>Instating) DATE 10. Election Campaign Financing</th> <th>FEE IS \$150.00 Fee will be \$550.00</th> <th>FILE NOW !!! I After MAY 1, 2000</th> <th>Signature, typed or printed name of registered agent and regaration is eligible to satisfy its Intangible g requirement and elects to do so.</th> <th>9. This corpo Tax filing r</th>	4 - 0 ( \$5.00 Mi Added to F	Instating) DATE 10. Election Campaign Financing	FEE IS \$150.00 Fee will be \$550.00	FILE NOW !!! I After MAY 1, 2000	Signature, typed or printed name of registered agent and regaration is eligible to satisfy its Intangible g requirement and elects to do so.	9. This corpo Tax filing r
NAME       TOOTLE, WILLIAM A       NAME       John E. EPPARD         STREET ADDRESS       1202 THOMAS CIR-       STREET ADDRESS       ISO WILD WOOD DRIVE         CITY-ST-ZIP       WINTER SPRINGS FL-       CITY-ST-ZIP       SANFORD, FL 32773         TITLE       D       D       Delete       TITLE         NAME       TOOTLE, EVELIN       STREET ADDRESS       D/VP/T       Schart CRD, FL 32773         STREET ADDRESS       1202 THOMAS CIR       STREET ADDRESS       STREET ADDRESS       CITY-ST-ZIP       SUS ANJE EPPARD         STREET ADDRESS       1202 THOMAS CIR       STREET ADDRESS       CITY-ST-ZIP       SUS ANJE EPPARD       DRIVE         CITY-ST-ZIP       WINTER SPRINGS FL       Delete       TITLE       D/VP/T       Schart CL         NAME       STREET ADDRESS       1202 THOMAS CIR       STREET ADDRESS       SCHARD, FL       32773         TITLE       D/P       Delete       TITLE       Schart CL       Change         NAME       VOLAD WOOD       DR       STREET ADDRESS       STREET ADDRESS       STREET ADDRESS         GITY-ST-ZIP       Schart CL       STREET ADDRESS       STREET ADDRESS       STREET ADDRESS       STREET ADDRESS         GITY-ST-ZIP       SANFORD, FL       32773       STREET AD						11
TITLE       D <th>Change 🗙</th> <th>E. EPPARD NILDWOOD DRIVE</th> <th>NAME 30+</th> <th>Delete</th> <th>TOOTLE, WILLIAM A 1202-THOMAS CIR</th> <th>NAME STREET ADDRESS</th>	Change 🗙	E. EPPARD NILDWOOD DRIVE	NAME 30+	Delete	TOOTLE, WILLIAM A 1202-THOMAS CIR	NAME STREET ADDRESS
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TITLE     Delete     TITLE       NAME     NAME       STREET ADDRESS     STREET ADDRESS       CITY-ST-ZIP     CITY-ST-ZIP	Change 🛄	Chan	NAME STREET ADDRESS			TITLE NAME STREET ADDRESS
TITLE     Delete     TITLE     Change       NAME     NAME       STREET ADDRESS     STREET ADDRESS       CITY-ST-ZIP     CITY-ST-ZIP	Change 🔲	Chan	NAME STREET ADDRESS	Delete	35	NAME STREET ADDRESS