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6. Name and Address of Current Registered Agent				<del></del>	7. Name a	and Address of	New Registered			1 .
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JACKSONVILLE FL 32207			City	Jall Jac	ahasse e		FI		1-024(	-  3•
8. The above	named entity submits this statement for	or the purpose of changing its re	gistered office	or (egistere	ed agent, or	both in the State	e of Florida.	823	01	
SIGNATURE	Signature, typed or printed name of registered agent	By:	L Corp.	1(	Del (Statistica)	1	5/3	100	*	
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· indicated	certify that the information supplied with the on this report is true and accurate and shill to company or the receiver or truster.	n this filing`does not qualify for the that my signature shall have the e empowered to execute this rep	e same legal eff	ect as if ma	ade under o	ath; that I am a	tutes. I further ce managing memb	ertify that the in er or manage	formation r of the	

SIGNATURE:

× 2/29/2000 (904) 733 - 489 9
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