	MENT # L99000	0003442	,		,		
1. Entity Name	PIE PUBLISHERS, LLC		₩ ~3		FILED SECRETARY OF STATE	E.	
				עוס	SECRETARY OF SORPORAT	IOH5;	
Principal Place	e of Business	Mailing Address			I DEC 18 AMIO:	19 '	
1 NE FIRST A OCALA FL 34	AVENUE, SUITE 303 470	1 NE FIRST AVENUE, SI OCALA FL 34470	UITE 303		1 DEC 10 mm		
2. Principal Pl	ace of Business	3. Mailing Address	• 0-050				
Suite, Apt.	#, etc.		AIN STREE	1	DO NOT WRITE IN TH	IIS SPACE	
City & State	3	City & State		4. FEI Numb	APPLIED FOR	I JAp	plied For
<u> </u>		WILLIST		65-09			t Applicable
Zip	Country	^{zip} 32696	Country		of Status Desired	\$5.00 Add Fee Require	
	6Name and Address of Curren	t Registered Agent	Name	7Name and	Address of New Register	ed Agent	
	OW, CHESTER J		Street Addres	IARON C. BE s (P.060 on Number	RANNAN, CPA PA EIN STREETS ¹⁰		
	IE FIRST AVENUE, SUITE 303 ALA FL 34470				ON, FL 32696		
			City			Zip Code	e
			City		D=	Zip Codi	
R The above	named Solity submits this statement	for the purpose of changing it		tered agent or ho	-	Zip Code	
8. The above	named entity submits this statement		s registered office or regis	2.	th, in the State of Florida.		
8. The above	named entity submits this statement) Dannam		2.	th, in the State of Florida.	10/10/01	<u> </u>
	Shanan C. G) And title if applicable. (NO) FILE N	s registered office or regis SHARON C TE. Registered Agent signature requi	BRANN irred when reinstating)	th, in the State of Florida.	10/10/01	8
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SIGNATURE: MUMACINE REQUIRED

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