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GENEVA	FL 32732-0469							·····		
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<ol> <li>The above</li> </ol>	named entity submits	this statement fo	or the purpose of changing	g its register	ed office or re	egistered agent,	or both, in the State o	f Florida.		
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SIGNATURE	Signature, typed or printed nar	ne of registered agent	and title if applicable. (	NOTE: Registere	ad Agent signature	required when reinsta	ling)	DATE		
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