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1997

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

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Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M18755 (2) 8295 ASSOCIATES, INC.								
Principal Place of Business 8295 N. MILITARY TR., SUITE A	Mailing Addre	ARY TR., SUI						
PALM BCH GARDENS FL 33410	PALM BUT GA	PALM BCH GARDENS FL 33410-8312			Date incorporated or Qualified			
2. Principal Place of Business	2a. Mailing Ad	Ideach	<u> </u>		07/31/1985 4. FEI Number		02/14/1996	
1	26	101638			59-2560146			Applied For Not Applicable
Suite, Apt. #, ctc.	Suite, Apt.	#, etc.			5. Certificate of Status Desir	ed 🔲	• • •	Additional
City & State	27 City & State							Required
3	28				6. Election Campaign Finant Trust Fund Contribution			May Be d to Fees
Zip Country	Zip		Country		6. This corporation has liabi			s. 199.032,
4 25 9. Name and Address of	Current Registered Agen		30	·····	Florida Statutes 10. Name and Address of N		No No	
HURD, ROGER C.	Chitelit Negleteled Agel		81	Name	IV. Halle alla Audites di l'	ion Hodiste	IBO AGOIN	
8295 N. MILITARY TR., SUITE	Α		82	Street Addr	ress (P.O. Box Number is Not Ad	centable)		
PALM BCH GARDENS FL 334	10							
			83					
			84	City	· · · · · · · · · · · · · · · · · · ·		FL 85 Z	p Code
Pursuant to the provisions of Sections 6	07.0502 and 607.1508. Flo	orida Statute	s the above-r	named corr	poration submits this statement for	or the purpos	se of changing	its registered
Pursuant to the provisions of Sections 6 office or registered agent, or both, in the agent I am familiar with, and accept the provisions of the provisi	507.0502 and 607.1508, Fig ie State of Florida. Such ch ie obligations of Section 60	orida Statute lange was al	es, the above-ruthorized by the rida Statutes.	named corp he corporat	ooration submits this statement fi tion's board of directors. I hereb	or the purpos y accept the	se of changing appointment a	its registered as registered
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Signature Typed or preted name of regis	stered agent and title if applicable		: Registered Agent		ired when reinstating)	DA	TE	
IGNATURE Separation typical or parented nature of region. 2. OFFICE	stered agent and title if applicable	(NOTE	: Registered Agent			DA	TE AND DIRECTO	DRS IN 12
Signature Signature typed or profed hance of register. 2. OFFICE ILLE STD	stered agent and title if applicable		: Registered Agent		ired when reinstating)	DA	TE	DRS IN 12
IGNATURE Signature typed or prefed name of regis C. OFFICE ILE STD HURD, ROGER C.	RS AND DIRECTORS	(NOTE	: Registered Agent 13. 1.1 TITLE	signature requi	ired when reinstating)	DA	TE AND DIRECTO	DRS IN 12
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