DOCUMENT #	M293	5	4	

1. Entity Name

VARLEY-CAMPBELL & ASSOCIATES, INC.

Principal Place of Business

C/O REED B. VARLEY

1110 BRICKELL AVE., SUITE 430

MIAMI FL 33131

Zip

~33145

Mailing Address

C/O REED B. VARLEY

1110 BRICKELL AVE., SUITE 430

MIAMI FL 33131

2. Principal Place of Business 3. Mailing Address WAY 2103 CORAL 2103 CORAL WAY Suite, Apt. #, etc. Suite, Apt. #, etc. SUITE 304 SUITE 304 City & State City & State MIAMI

MIAMI

Country USA. うづけら

Country

5. Certificate of Status Desired

6. Name and Address of Current Registered Agent

VARLEY, REED B. 1110 BRICKELL AVE. SUITE 430

MIAMI FL 33131

Street Address (P.O. Box Number is Not Acceptable)

CORAL WAY

SUITE 304

VARLEY

8. The above named entity supmits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State

X (See criteria on back) 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PTS TITLE ☐ Delete TITLE VARLEY, REED B. NAME NAME 2103 CORAL WAY SUITE 304 STREET ADDRESS 1110 BRICKELL AVE. #430 STREET ADDRESS CITY-ST-ZIP MIAMI FL CITY-ST-7IP MIAMI ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Defete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

ED B VARLEY SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO