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I do 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	SUITE NAPL Pursuant to office of re agent 1 am vA1URE 3 t ADDRESS S1-2iP t ADDRESS S1-2iP t ADDRESS S1-2iP t ADDRESS S1-2iP t ADDRESS S1-2iP	E 200 ES FL 33949 34 o the provisions of gistered agent, or n fam har with, and Stand re bassfor protect P FOWLER, WILM, 207 HARBOUR NAPLES FL 339 ST GRIECO, SIGRIU 18500 JACKSO	HIO3 Sections 607.0502 both, in the State of accept the obligati name of registeres agent OFFICERS AND OFFICERS AND A H. DRIVE, #3 40 34 10 3	and nile if application	B4 City uttes, the above-named consist authorized by the corpore statutes. Torida Statutes. Torida Statutes. DTE: Registered Agent signature requires. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 5.1 NITLE 5.3 STREET ADDRESS 1.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 1.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6 1 TITLE 6.2 NAME	ured when reinstating)	PL the purpose of cl accept the appoin DATE OFFICERS AND C C	hanging it harment as DIRECTOR Change Change Change	s registered registered S IN 12 Addition Addition Addition