Principal Place of Business Mailing Address PO BOX 2291 Principal Place of Business Place	DOCUI 1. Entity Nam	MENT # M99356	······································	RT (UBR)	Jul 26, 2000 8:00 an Secretary of State	
Suite, Apt. #. etc. Suite, Apt. #. etc. DO NOT WRITE IN THIS SPACE City & State City & State City & State Application Zip Country Zip Country Sec. Sec. 4. FEI Number 59-2008375 Next Application Sec. Next Application 4. Vame and Address of Current Registered Agent 7. Name and Address of New Registered Agent Next Application KASTEN, ALEXANDER M. 11 Stado PALM RD Street Address (P.O. Dox Number Is Not Acceptable) Street Address (P.O. Dox Number Is Not Acceptable) VERO BEACH FL 32863 Street Address (P.O. Dox Number Is Not Acceptable) City FL Zip Code 8. The above named onlity submits this statement for the purpose of changing its registered agent, or both, in the Stato of Florida. Signature, Upsid prime digitable agent of the florida. Other Registered Agent, or both, in the Stato of Florida. SIGNATURE Signature, Upsid prime digitable agent of the florida. Other SEPTEMBER 13, 2000-MIT, Will be 5700.00 Other September 10, address of Correcters and Diffectors and the florida. SIGNATURE OFFICERS AND Diffectors NM Diffectors NM. If the State Address TO OFFICERS AND Diffectors NM Diffectors NM. Other SEPTEMBER 13, 2000-MIT, Will be 5700.00 Next Fundass Corecters and Diffectors NM Diffectors NM Diffectors NM Diffectors N	174 W COMSTO SUITE 200 WINTER PARK	OCK AVE	PO BOX 2291 P.O. BOX 2291 WINTER PK FL 32790-2291			
City & State City & State 4. FEI Number 59-2908375 Applied For Zip Country Zip Country S. Cartificate of Status Desired \$8.75 Additional res Required 6.º Name and Address of Current Registered Agent 7. Name and Address of Yew Registered Agent Name	2. Principal Place of Business					
Zip Country Zip Country S. Certificate of Status Desired S. 87.5 Additional res Required res Req res Required res Required res Requ						
Control of a constrained of constrained				Country	S9-2909373 Not Applica	
KASTEN, ALEXANDER M. 11 SAGO PALIA RD VERO BEACH FL 32963 Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code 8. The above named entity submits this statement for the purpose of changing its registered adjace or pressdand days and their submits a	Zip 				5. Certificate of Status Desired Fee Required	
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City FL Zip Code Signature, typed or preted rame of legistered agent and to if applicable. (HOTE: Registered agent, or both, in the State of Florida. SIGNATURE Signature, typed or preted rame of legistered agent and to if applicable. (HOTE: Registered Agent agenta agent, or both, in the State of Florida. Nis corporation is eligible to satisfy its intengible Tax filling requirement and elects to do so. After SEPTEMBER 18, 32000-Mit, will be \$750.00 Net corporation is eligible to satisfy its intengible Tax filling requirement and elects to do so. Make Check Payable to Department of State 10. Election Campaign Financing Make Check Payable to Department of State Intre Make Check Payable to Department of State Intre Make Street Addets Intre Make Street Addets Paya Intre Make Street Addets Paya Intre Make Street Addets Paya Colspan= 2 Intre				Street Addr		
B. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. SIGNATURE Sequence (yood or primed name of registered event and its if applicable. (NOTE: Registered Agent State State of State Signature (registered event and its if applicable. (NOTE: Registered Agent State State of State State State of State State State of State S				City	FL Zip Code	
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VAME STREET ADDRESS 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	STREET ADORESS City-st-zip	· ·	Delete	STREET ADDRESS CITY-ST-ZIP	🗋 Change 🛄 Addii	