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11. Pursuant to the provisions of Sections 617/0502 and 617.1508, Florida Statutes, the above-mane do comporation submite this statement for the purpose of changing its registered agent 1 am farrillar with, and accept the obligations of, Section 617/0503, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and the if applicable. (NOTE Registered Agent January 1 and the if applicable. DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. PD DELETE 11 mile Ohange Additional type and the if applicable. 14. VD DELETE 11 mile Ohange Additional type and type and the if applicable. 14. VD OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. VD DELETE 11 mile Ohange Additional type and the if applicable. 14. VD OFFICERS AND DIRECTORS 13 STRET ADDRESS 0 Ohange Additional type and type					84 City		FI 85 Zip	Code
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