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Suite, Apt. 4, etc. Do Not Write IN this service City & State Chi & State City & State Country Source, Apt. 4, etc. 4. PEI Number's SP3251941 Applied Tor: Name and Address of Current Registered Agent An and Address of Current Registered Agent 7. Name and Address of New Registered Agent State Apt. 4, etc. Name SEAUCHAMP, W O III Steet Address (P.O. Box Number's Not Acceptable) Steet Address (P.O. Box Number's Not Acceptable) Steet Address (P.O. Box Number's Not Acceptable) Steet Address (P.O. Box Number's Not Acceptable) City FLE NOW: FL Zip Coole FILE NOW: 9. Electon Compage Financing Stop May Be Address or OFFICERS AND DIRECTORS City 9. Electon Compage Financing Stop May Be Address or OFFICERS AND DIRECTORS City 9. Electon Compage Financing Stop May Be Address or OFFICERS AND DIRECTORS City 9. Director Sint O Mate Check Payable to D Controns/CitAnde Sinter City Sint Acceptable (interefine addres	1 N YOUNG BLVD HIEFLAND FL	CHIEFLAND L 32644			80023	900 0		
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Chieffand FL 59-325 1941 IntrApplicable Zip Country S. Certificate of Status Desired B8.75 Additional rese Required 3.L 3.L 3.L Country S. Certificate of Status Desired B8.75 Additional rese Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BEAUCHAMP, W O III Street Address (P.O. Box Number Is Not Acceptable) Street Address (P.O. Box Number Is Not Acceptable) The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida. CRy The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida. INATURE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Addot to Fees Make Check-Payable to Department of State CHIFCERS AND DIFECTORS 11. Note Face and Pace agents PD WCLCH IOR, TULAN IT A S. I a 2 S I N E GP LAN FL Change Addition Make Street Address CHIFCERS AND DIFECTORS 11. Note Face address PD WCLCH IOR, TULAN IT A S. I a 2 S I N E GP LAN FL Change I Addition Make Street Address CHIFCERS AND DIFECTORS 10. Deles The Note S I N C. Note Face address I a 2 S I N E T. I D Change I Addition Street Address Change I Addition II a 2 S I N E T. I B CANIS S I N L AT HE IN IT A S. I a 2 S	Suite, Apt. #, etc.	. Suite, Apt. #, etc.			DO NOT WRITE IN T	THIS SPACE		
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BEAUCHAMP, W 0 III Street Address (P.O. Box Number is Not Acceptable) 9 NE 3R0 STREET HEFLAND FL 32626 Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code City FL Zip Code The above named entity submits this statement for the purpose of changing its registered agent, or both. In the state of Florida. NATURE Signare. type1 is private row of registered agent and the I systatue (NOTE Registered Agent synthere registered agent, or both. In the state of Florida. NATURE Signare. type1 is private row of registered agent and the I systatue (NOTE Registered Agent synthere registered agent, or both. In the state of Florida. NATURE Signare. type1 is private row of registered agent and the I systatue (NOTE Registered Agent synthere registered agent, or both. In the state of Florida. NATURE Signare. type1 is private row of registered agent and the I systatue (NOTE Registered Agent synthere registered agent, or both. In the state of Florida. VD OFFICERS AND DIRECTORS 11. ADDITIONS/CHANDES to OFFICERS AND DIRECTORS IN 10 OUNCEY, JACK Imate Index Imate Index Imate Index Size TREITANDER Call Change I Addition Imate Index Imate Index VD // Detein Imate Index Imate Index Imate Index <td>6. Name and Address of Curre</td> <td>ent Registered Agent</td> <td>Namo</td> <td>7. Name and /</td> <td>Address of New Registe</td> <td>ered Agent</td> <td></td>	6. Name and Address of Curre	ent Registered Agent	Namo	7. Name and /	Address of New Registe	ered Agent		
City FL /20 code The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida. NATURE Bigeden, typed or private runne of regressed spect and the if applicable. (MOTE Regelened Agent signature recursed when remaining in the state of Florida. FILE NOW: S. Election Campaign Financing Trust Fund Contribution Added to Fees OFFICERS AND DIFECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIFECTORS IN 10 UNCEY, JACK Make Check, Payable to Department of State OUNCEY, JACK Make Check Payable to Department of State Str.20 OFFICERS AND DIFECTORS 11. VD ////////////////////////////////////	EAUCHAMP, W O III 9 NE 3RD STREET			dress (P.O. Box Number	is Not Acceptable)		· · ·	
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