

**FILED**  
**Apr 23, 2008 8:00 am**  
**Secretary of State**

[illegible]

number	NO-T APPLICABLE	Applied For
		Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

7. Name and Address of New Registered Agent

Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

SIGNATURE ~~delete~~ Tisha Schepers 4/9/08

Signature, typed or printed name of registered agent and title (if applicable) (NOTE: Registered Agent signature required when registering) DATE

**Make Check Payable to  
Florida Department of State**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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NAME	
STREET ADDRESS	
CITY - ST - ZIP	

SIGNATURE: Tasha Schwan 4/9/08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR