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333	24 Country	33324	Country		5. Certificate of Status Desir	ed 🔲	\$8.75 Ada Fee Require	
	6. Hame and Address of Current	tegistered Agent		No.	7. Name and Address of N	nw Registered	Agent	
ORT	EGA, GUSTAVO	ı		Name				
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8. The above	named antity submits this statement for	the purpose of changing its re	gistered o	office or registere	ed agent, or both, in the State o	f Florida.		•
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	Significant hyperiod or printed name of registered agent o	nd the applicable. (NOTE: F	Inglatured Age	ent signiture recuired :	when Reinstaling)	CASTE		
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Indicated	certify that the information supplied with on this report or supplemental report is	true and accurate and that my	eignature :	shell have the sa	ame legal effect as if made un	der cath; that I i	emi en chiicer	or director
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page rate

HOGOT USA Realty, INC.

TO: DIVISION OF CORPORATION P.O. BOX 6327 TALLAHASSEE, FL 32314

TO WHOM IT MAY CONCERN:

ENCLOSED YOU WILL FIND THE ANNUAL REPORT FORM ALONG WITH A CHECK PAYABLE TO THE FLORIDA DEPARTMENT OF STATE TO PROPERLY UP-DATE THE ABOVE MENTIONED CORPORATION.

I FURTHER STATE THAT I NEVER RECIEVED FIRST NOR SECOND NOTICE OF SUCH REPORT. PLEASE TAKE THIS LETTER AS AN EXCUSE TO PUT THIS CORPORATION IN ITS CURRENT STATUS.

THANK YOU IN ADVANCE FOR YOUR PROMPT ATTENTION IN THIS MATTER AND IF YOU SHOULD HAVE ANY QUESTION REGARDING THIS LETTER DON'T HESITATE TO CONTACT ME.

CORDIALLY,

PRÉSIDENT