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MESNULE FL 2809 GAINESYILLE FL 2809 Principal Place of Bungham 2. Maining Address 1855 NE 12 ¹⁰ Ave. Do Not White IN THIS SPACE Safe Aut. Acc. Suite, Aut. * etc. Suite, Aut. * etc. Do Not White IN THIS SPACE Safe Aut. Acc. Cover A State Cover A State 4. *El Number 59-3652621 Applied For Cover A State Cover A State Cover A State Cover A State A State Aut. * etc. Do Not White IN THIS SPACE Cover A State Cover A State Cover A State Cover A State A State Aut. * etc. Do Not White IN THIS SPACE Cover A State Cover A State Cover Aut. * etc. Cover Aut. * etc. Name Aut. * etc.	rincipal Place of Business	Mailing Address	<u> </u>	
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GAINESVILLE CAINESVILLE CAINESVILLE SP-4552.62.1 INA Applicable 326-61 USA ID S2.641 Country S8.75 Additional Free Registered Agent S8.75 Additional Free Registered Agent KHAN, AKHTAR M Sozi NE STIN ST. GAINESVILLE FL 32609 INATE KHAN, AKHTAR M Sozi NE STIN ST. GAINESVILLE FL 32609 INATE KHAN, AKHTAR M Street Address of New Registered Agent INATE KHAN, AKHTAR M Street Address of New Registered Agent INATE KHAN, AKHTAR M Street Address (P.D. Box Number in Not Acceptable) The above named entity submits this statement for the purpose of changing its registered office or registered agent, or box, in the State of Fonds. INATE KHAN, AKHTAR M Street Address (P.D. Box Number in Not Acceptable) The above named entity submits this statement for the purpose of changing its registered office or registered agent, or box, in the State of Fonds. INATE KHAN, AKHTAR M The above named entity submits this statement for the purpose of changing its registered office or registered agent, or box, in the State of Fonds. INATE KHAN, AKHTAR M The above named entity submits the statement for the purpose of changing its registered office or registered agent, or box, in The Composition Family Compares and Registered agent. INATE KHAN, AKHTAR M The above named entity submits the statement for the purpose of changing its registered office or registered agent. INATE KHAN, AKHTAR M The above named entity submits the statement for the purpose of changing its registered agent. INATE KHAN, AKHTAR M The above named entity With M			E D	4. FEI Number Applied For
32641 USA 32.641 USA 5. Certificate Status Desired The input definition of the input definin	GAINESVILLE	GAINESVIL	· · · · · · · · · · · · · · · · · · ·	59-3652621 Not Applicable
HAN, AKHTAR M Size 1 RE 36TH ST. GANESVILLE FL 32609 Size Address (P.O. Box Number (s Not Acceptable) IBS5 NE I2 ⁺ AVE, SUITE D City GAINESVILLE FL ZP Code City City GAINESVILLE FL ZP Code City City City City City City City City City City <td>32641 USA</td> <td>32.641</td> <td>USA</td> <td>5. Certificate of Status Desired Fee Required</td>	32641 USA	32.641	USA	5. Certificate of Status Desired Fee Required
The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. GARTURE GRATURE Grature	5921 NE 38TH ST.		Street Addres	NE 12 th AVE, SUITE D
E PD Intermediate	This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.	FILE NOW! After MAY 1, 20	E: Registered Agent signature requ II FEE IS \$150.00 01 Fee will be \$550.0	DATE DATE DATE DATE DATE DATE DATE DATE
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AE NAME EET ADDRESS STREET ADDRESS (-ST-ZIP STREET ADDRESS 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 indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.	LE ME EET ADDRESS Y- ST- ZIP	Delete	NAME STREET ADDRESS	Change Addition
indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.	IE EET ADDRESS	Delete	NAME STREET ADDRESS	Change Addition