PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

	PORATION STATEMENT		Sec	EPARTMENT OF STATCRETATIONS	TE \	FILED 05 NOV 29 PH 1: 20	
DOCU 1. Corporation	IMENT #	102000	900 G g	- 14		Saudin Tallahas a saudi	:
Tr	opic T	ile:	Forc.		AR .	Tross	
2. Principal 47 5 Suite, Apt. #,		don Pl.	3. Mailing Office	Herndon	4. Date Inco	STATE VUENT	04-05
City & State	,		City & State		To Do Bu	usiness in Florida	3-2002
50,000 Zip_	a 504a Countr	FI.	Sara	sufa fl.	5. FE! Num!	·	Applied For Not Applicable
342	_	rasota	342	32 Saraso	fq 6. CERTIFICA		itional Fee required tificate of Status
			7. Nan	ne and Address of Current Re	egistered Agent		
	Name Rus	Seel				·	
	Street Address (P.0	O. Box Number is No		1.			
	Suite, Apt. #, Etc.		10.		 .		_
	City 5a Ca					State Zip Code	
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.							
8. I, being a		usota red agent of the abov	re named corporat	tion, am familiar with and accep	t the obligations of sec	FL 34232 ction 607.0505 or 617.0503, F.S.	
8. I, being a Signature of Registered A	appointed the register	red agent of the abov			nt the obligations of sec	11-12	-05
Signature of Registered A	appointed the register	red agent of the abov	EGISTERED AGEN			etion 607.0505 or 617.0503, F.S.	-05
Signature of Registered A	AgentAgentAgentAgentAgent	red agent of the abov	EGISTERED AGEN	NT MUST SIGN	ist at least 3 directors)	etion 607.0505 or 617.0503, F.S.	-05
Signature of Registered A	AgentAgentAgentAgent	red agent of the above RE s of Each Officer and Name of	EGISTERED AGEN	NT MUST SIGN ta nonprofit corporations must li Street Address of Officer and/or D	ist at least 3 directors) of Each Director	City / State / Zip	1, 34232
Signature of Registered A	AgentAgentAgentAgent	RE s of Each Officer and Name of ers and/or Directors	EGISTERED AGEN	NT MUST SIGN ta nonprofit corporations must li Street Address of Officer and/or D	ist at least 3 directors) of Each Director	City / State / Zip	1, 34232
Signature of Registered A	AgentAgent	RE s of Each Officer and Name of ers and/or Directors	EGISTERED AGEN	NT MUST SIGN ta nonprofit corporations must li Street Address of Officer and/or D	ist at least 3 directors) of Each Director	City / State / Zip	1, 34232
Signature of Registered A	Agent Run Agent Run and Street Addresses Office Run Run Run Run Run Run Run Ru	RE s of Each Officer and Name of ers and/or Directors	EGISTERED AGEN	NT MUST SIGN ta nonprofit corporations must li Street Address of Officer and/or D	ist at least 3 directors) of Each Director	Date 11 - 2-2 City / State / Zip	1, 34232
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Signature of Registered A 9. Names a Titles	Agent Russes Agent Russes Office Russes Agent Street Addresses Office Russes Russes Russes	red agent of the above RE s of Each Officer and Name of ers and/or Directors LLL,	EGISTERED AGEN d/or Director (Florid	NT MUST SIGN ta nonprofit corporations must li Street Address of Officer and/or D 475 / 475 / 475 / 475 / 475 / 475 / 475 / 475 / 475 / 475 / 475 /	ist at least 3 directors) of Each Director Herndon Jon Plan 11/29	City/State/Zip Surasufa f Su	1, 39232 3 4232 3 4232
Signature of Registered A 9. Names a Titles 7 7 10. I certify this reim owed by	appointed the register Agent	red agent of the above RE SULK RE s of Each Officer and Name of ers and/or Directors SULK A S	iver or trustee emperiolution has been el names of individual	NT MUST SIGN Ita nonprofit corporations must li Street Address of Officer and/or D A 75 / A 75 /	ist at least 3 directors) of Each Director Hern don't I com Pl, 11/29 ion as provided for in ceatisfies the requirementality for an exemption u	City/State/Zip Surasufa f Su	1, 34232 3 4232 3 4232 0.00