33543   0574   Certificate of status besided   Fee Rec     6. Name and Address of Current Registered Agent   7. Name and Address of New Registered Agent     HENDERSON, SHERI L   Name     1409 WiLDROSE DR   Street Address (P.O. Box Number is Not Acceptable)     .UTZ, FL 33549   City     FLE Nowing first statement for the purpose of changing fits registered office or registered agent, or both, in the State of Florida. I am familiar the obligations of registered registered agent and the if aplicable.     Norme   Street Address (P.O. Box Number is Not Acceptable)     City   FL     Zip   Street Address (P.O. Box Number is Not Acceptable)     Name   One     Signations of registered registered agent and the if aplicable.   (NotE Registered Agent signature reguted deen renetatorg)     Signation for registered registered agent and the if aplicable.   (NotE Registered Agent signature reguted deen renetatorg)     Signation for pointed name of registered agent and the if aplicable.   (NotE Registered Agent signature reguted deen renetatorg)     Signation for registered agent and the if applicable.   (NotE Registered Agent signature reguted deen renetatorg)     Signation of registered agent and the if applicable.   Not Free Resistered Agent signature reguted deen renetatorg)     OATE   Sitecitin Campaign Financling   \$5.00	05) Applied For Not Applicable Additional quired Code with, and accept
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Zip   Country   Zip 3.5.4.8   Country A   8. Certificate of Status Desired   \$87.75     Remote and Address of Current Registered Agent   7. Name and Address of New Registered Agent   Name     1ENDERSON, SHERI L   Name   Name   Street Address (P.O. Box Number is Not Acceptable)     .UTZ, FL 33549   Street Address (P.O. Box Number is Not Acceptable)   City   FL   Zip     . The above named entity submit this statement for the purpose of changing fits registered agent, or both, in the State of Florida. 1 am familiar via the obligations of registered agent of the purpose of changing fits registered Agent signature regard when remaining   Q - / 5 - (     IGNATURE	Not Applicable Additional quired Code with, and accept
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The above named entity submits his statement in the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar the obligations of registered agent and the if applicative. <b>2</b> - 15 - 0 <b>2</b> - 15 - 0 <b>2</b> - 15 - 0 <b>307</b> miles hyperor prefer hame of registered agent and the if applicative. <b>(NOTE</b> Registered Agent signature required when rematating) <b>DATE FILE NOWILI FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9.</b> Election Campaign Financing <b>7</b> rust Fund Contribution. <b>9.</b> Election Campaign Financing <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11. IDERT IDERT</b>	with, and accept
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