

FILED
Mar 13, 2008 8:00 am
Secretary of State

DOCUMENT # P06000083160

Mailing Address

2123 SAXON BLVD
DELTONA, FL 32725

3. Mailing Address

Suite, Apt. #, etc.

City & State

Country

Zip

Country

Chg-P

CR2E034 (12/06)

Applied For
Not Applicable

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

7. Name and Address of New Registered Agent

Narne

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating.)

DATE _____

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be
Added to Fees

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

 Delete

☐ Delete☐ Delete☐ Delete☐ Delete☐ Delete

TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
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SIGNATURE:

AMODUUE HOQUE

03~10~08

386-532-7700

Date: _____

Daytime Phone # _____