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### PALERMO CT. PUNTA GORDA FL 33950 ### City ### City		9, Name and Addr	ess of Current	Hegistered Agent		81 Name	10. Name and Address of New	v Registered A	gent	
PUNTA GORDA FL 33950 83					ŀ	82 Street Add	ress (P.O. Box Number is Not Accept	table)		
Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I formitier with, and accept the objection 607,0505, floridad Statutes. NATURE Synthem, head or printed rearred registered agent and store it acceptable. Printed Statutes in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I formitier with, and accept the objection 607,0505, floridad Statutes. NATURE Synthem, head or printed rearred registered agent agent and severable printed rearred agent. I formitier with, and accept the objection 607,0505, floridad Statutes. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (1) with a state of Floridad State of Fl						83		·····		· · · · · · · · · · · · · · · · · · ·
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I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I furthe certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made uncertified t	Tamiliar with Tamiliar with GNATURE LE ME EEL ADDRESS (-ST-ZIP) E EEL ADDRESS (-ST-ZIP) E EEL ADDRESS (-ST-ZIP) E EEL ADDRESS -ST-ZIP E EEL ADDRESS	PTC KOSINSKI, KENN 2501 RIO PALER PUNTA GORDA I D KOSINSKI, KENN 2501 RIO PALER PUNTA GORDA I S KOSINSKI, KENN 2501 RIO PALER PUNTA GORDA I S KOSINSKI, JULIE 2501 RIO PALER	ations of, Section of registered agent an OFFICERS AND IETH MO CT. FL IETH MO CT. FL S. MO CT.	DELETE DELETE DELETE	2 NAI 2 NAI 3 SIR 4 CIT 5 NAI 5 NAI 6 SIR 6 SIR	Agent signature require TILE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS H REET ADDRESS H REET ADDRESS	ard of directors. Thereby accept the ap	DATE FRICERS AND D	ging its registered and interest in the control of	egistered office agent. I am RS IN 12 Addition Addition Addition Addition