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180 MORNING SIDE DR. 83 CORAL GABLES FL 33133 84 64 City FL 85 Zip Code 94 City FL 85 Zip Code 0ffice or registered agent, or both, in the sitan of Florids, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of Section 607.0505, Florida Statutes. OMTE CORAL GABLES FL 33133 (MOTE Registered Agent significe required after originations agent and the insplate. OMTE 2 OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 2 OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 2 OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 2 OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 4 DELETE 11 TITLE Change Addition 2 GUANCHEZ, VIRGINIA 21 SITEET ADDRESS Change Addition 4 DELETE 11 TITLE Change Addition 13 DELETE 11 TITLE Change Addition						ress (P.O. Boy Number is Not Acceptat	yle)	
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Pursuant to the providence of Sections 807 0502 and 807 1508. Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, section 607,0505. Florids Statutes. GNATURE Bignitum, the obligations of, section 607,0505. Florids Statutes. (NOTE Registered agent and the appointment as registered agent. I am familiar with, and accept the obligations of, section 607,0505. Florids Statutes. GNATURE Bignitum, the obligations of, section 607,0505. Florids Statutes. (NOTE Registered Agent signature registered agent, or pression submits this statement for the purpose of changing is registered agent. I am familiar with, and accept the obligations of, section 607,0505. Florids Statutes. (NOTE Registered Agent signature registered agent, or pression submits this statement for the supportance of the appointment as registered agent. I am familiar with, and accept the obligations of, section 607,0505. Florids Statutes. (NOTE Registered Agent signature registered agent, or pression submits this statement for the support and the appointment as registered agent. I am familiar with, and accept the obligations of, section 607,0505. Florids Statutes. (NOTE Registered Agent signature registered agent, and the all splitable. (NOTE Registered Agent signature registered agent, and the all splitable. (NOTE Registered Agent signature registered agent, and the all splitable. (NOTE Registered Agent signature registered agent, and the all splitable. (NOTE Registered Agent signature registered agent, and the all splitable. (NOTE Registered Agent signature registered agent, and the all splitable. (NOTE Registered Agent signature registered agent, and the all splitable. (NOTE Registered Agent signature registered agent, and the all splitable. (NOTE Registered Agent signature registered agent, and the all splitable. (NOTE Registered Agent signature re	CON	AL CADLES FL 33133						
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