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Suite, Apt. 22 SUIT2		ED BER	GER 27	Suite, Apt. #, etc. STE 1010	o ED BERGI	ER. S. Certifica	te of Status Desired		•	5 Addition Required
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	9. Name and	Address of C	urrent Regis	slered Agent		10. Name a	ind Address of New R	egistered i	Ágent	
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	19700			,	B4 City				85 Z	ip Code
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l or register	red agent, or both.	Sections 607.	.0502 and 60	7.1508, Florida Statutes,	the above named cor	poration submits th	ws statement for the pur	pose or cna	ungung its i	registereo
		IT THE STATE OF	Florida, Suc	h change was authorized	by the corporation's t	board of directors. I	hereby accept the app	ointment as	registered	d agent. I a
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