	PLEASE READ	ALL INSTRUC	CTIONS	BEFORE C	OMPLET	NG THIS FORM.		
	PLICATION FOR STATEMENT	FLORIDA DE Sand Seci		NT OF STATE tham tate		overm o b lives force		
DOCUMENT # P9300064463					From Cords Core			
1. Corporation Name ROBERT SEARL DESIGN GROUP, INC.					97 DEC 24 AM In: LE			
Principal Place of Business Mailing Address					SE TAL	ORLIAKY UL STATE LAHASSEE.FLORID	A	
469 SPINNAKER RD FT LAUDERDALE FL 33326		469 SPINNAKER RD FT LAUDERDALE FL 33326						
If above addresses are incorrect in any way, line through incorrect information and enter of				oorraalian halau	REINS	STATEMEN	T 97	
2. New Principal Office Address, if Applicable Suite to Career and Annual Career an		New Mailing Office Address, If Applicable Suite, Apt. #, etc.		Date Incorporated or Qualified To Do Businoss in Florida 09/15/1993				
City & State	ST MALLARD LAN		AME	······································	5. FEI Number	NOT APPLICABLE	Applied For Not Applicable	
zip 3	3327 Country USA	Zip	Country		I	OF STATUS DESIRED (60	Additional Fee required a Certificate of Status	
7. Names a	Names and Street Addresses of Each Officer and/or Director (Florida nonprofite(s) Name of Officers and/or Directors 3 (Dec. 2)			orations must list at least 3 directors) Streot Address of Each Officer and/or Director Use Post Office Box Numbers)		City / State / Zip		
D	SEARL, ROBERT	469-4	SPINNAKER-			FILAUDERDALE FL 333	3332)	
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8. Name and Address of Current Registered Agent Name SEARL, ROBERT					9. Name and A	ddress of New Registered A	gent	
440 spininaker pd Fricauderoale fe 33328				Street Address (P.O. Box Number is Not Accepta Suite, Apr. 1, Etc. City		3332	-)	
10. I, being	appointed the registered agent of the abo	ove primed of poration,	am familiar wit	-	oligations of Section	FL	Zip-Code	
Signature o Registered	Agent	Jean) EGISTERED AGENT MI	L ÜST SIĞN			Date 12/1/4	7	
	is corporation owes or ha angible Personal Proper			r Yes 🖄	No 🗌	(See other side on intang		
this rein: owed by	that I am an officer or director or the receistatement application, the reason for dissorthe corporation have been pald and the application is true and accurate, and my significant or the countries of the corporation is true and accurate.	olution has been eliminat names of Individuals listi	ted, the corpor ed on this forn	rate name satisfies to do not qualify for a	the requirements of an exemption und	of section 607.0401 or 617.040	1, F.S., that all fees	
SIGNAT	URE: Motal J. SIGNATURE AND TYPED OR PR	Sear I	KUB:	EXCT T.S	erve.	126 (97) Day	349-1005 linie Phone #	