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If Pursuant to the provisions of Sections 607.0502 and 607.1504, 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, and accept the obligations of, Section 607.0502, Florida Statutes. SIGNATURE Signature, north or ported neare of registered agent can be appointed agent tam to accept the obligations of, Section 607.0502, Florida Statutes. SIGNATURE Signature, north or ported neare of registered agent can the P agentable Appoint or ported neare of registered agent can be appointed agent and the provise of the appointed agent can be appointed age	DOL	NEDIN FL 34698			83	11.1.2.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.		
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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 under gath; that I am an	SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name OF PVTD KUCA, MIROSLAWA 104 PATRICIA AVEN DUNEDIN FL	of registered agent and the FICERS AND DIF	Ue if applicable. (NOTE: RECTORS DELETE DELETE DELETE DELETE DELETE DELETE	es, the above-named cor uthorized by the corporat inda Statutes. Registered Agent signature requir 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4. CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME	red when reinstatling) // ADDITIONS/CHANGES TO	FL 85 the purpose of chang ccept the appointmen DATE OFFICERS AND DIR OFFICERS AND DIR C <td>Zip Code ing its registered t as registered ECTORS IN 12 hange Addition hange Addition hange Addition hange Addition hange Addition</td>	Zip Code ing its registered t as registered ECTORS IN 12 hange Addition hange Addition hange Addition hange Addition hange Addition
	SIGNATURE I2. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP	Signature, hypes or printed name of PVTD KUCA, MIROSLAWA 104 PATRICIA AVEN DUNEDIN FL	of registered agent and the FICERS AND DIF	Ue if applicable. (NOTE) RECTORS DELETE DELETE DELETE DELETE DELETE DELETE DELETE DELETE DELETE	es, the above-named cor uthorized by the corporat inda Statutes. Registered Agent signature requir 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 3.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	poration submits this statement for tion's board of directors. I hereby a ADDITIONS/CHANGES TO	FL 85 the purpose of change ccept the appointmen DATE OFFICERS AND DIR OFFICERS AND DIR C <td>Zip Code ing its registered t as registered ECTORS IN 12 hange Addition hange Addition hange Addition hange Addition hange Addition hange Addition</td>	Zip Code ing its registered t as registered ECTORS IN 12 hange Addition hange Addition hange Addition hange Addition hange Addition hange Addition