PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS DOCUMENT # P94000 020074 1. Corporation Name H. Harrison Valentine, Inc. Suite April 4, etc. 3. Mailing Office Address Suite, April 4, etc. Suite April 5, etc. Suite April 4, etc. Suite April 5, etc. Suite April 5, etc. Suite April 6, etc. Suite April 7, FLORIDA To Do Business in Facility 3-18-54 Appried For To Do Business in Facility 3-18-54 To Do Business in Facility 3-18-54 April 6, etc. Suite April 7, FLORIDA To Do Business in Facility 3-18-54 April 6, etc. Suite April 7, FLORIDA To Do Business in Facility 3-18-54 April 6, etc. Suite April 7, FLORIDA To Do Business in Facility 3-18-54 April 6, etc. Suite April 7, FLORIDA To Do Business in Facility 3-18-54 April 6, etc. Suite April 7, FLORIDA To Do Business in Facility 3-18-54 April 6, etc. Suite April 7, FLORIDA To Do Business in Facility 3-18-54 April 6, etc. Suite April 7, FLORIDA To Do Business in Facility 3-18-54 April 6, etc. Suite April 7, FLORIDA To Do Business in Facility 3-18-54 April 6, etc. Suite April 7, FLORIDA To Do Business in Facility 3-18-54 April 6, etc. Connetty 4-18-54 April 6, etc. Connetty 3-18-54 April 6, etc. Connetty 4-18-54 April 6, etc.									-		• • • • • • • • • • • • • • • • • • • •		
SECRETARY OF STATE 1. Corporation Name H. HARRISON VALENTINE, Inc 3. Mailing Office Address of Current Registered Agent 7. Name and Address of Current Registered Agent 7. Name and Address of Current Registered Agent 8. I. being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607 0505 of 617 0503, F.S. Signature of Registered Agent 8. I. being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607 0505 of 617 0503, F.S. Signature of Registered Agent REGISTERED AGENT MUST SIGN 9. Names and Street Address of Each Officer andre Officer of Officer andre Officer Agent 8. The Address of Each Officer andre Officer Agent Must State I least 3 directors)			2007		S	ecretar	y of State			03		: 42	
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7. Name and Address of Current Registered Agent Name H. HARRISON VALENTINE Street Address (P.O. Box Number is Not Acceptable) 3170 NW 43th STREET Suite, Apt. #, Etc. City NIAMI 8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0503, F.S. Signature of Registered Agent Make in Valuation REGISTERED AGENT MUST SIGN 9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Titles Officers and/or Directors Street Address of Each Officer and/or Director Officer and/or Director ALAMAN VALENTINE 3170 NW 49th Street MIAMI MIAMI MIAMI STREET MIAMI MIAMI SIGNAM MIAMI SIGNAM MIAMI MI	Zip	_/					Country		6.		FRACE TO A		
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