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|--|---|---|--|---|--|--|---|
|  |   |   |  | RTMENT OF STATE   | Mar 04   | 1998 8:  | :00a  |
|  |   |   |  | B. Mortham<br>ary of State  | Secret   | ary of S   | State   |
| 1998   |   | DIVISION OF CORPORATION   |  | CORPORATIONS  | Secretary of Sta   |  | state   |
|  | MENT # P94<br>AWESOME DEVELOPM  | OOOO72  | • •  | )   |  |  |   |
| Principal Place of Business Mailing Address 899 KNIGHTS TRAIL 899 KNIGHTS TRAIL  |   |   |  |   |  | UNIN NAINI (UAND MUUN DING N   | IBI( 0[0] IB0(  |
| NOKOMIS FL 34275<br>US   |   |   | MIS FL 34275   |   | DO NOT WRITE IN THIS SPACE   |  |   |
|  |   |   |  |   | 3. Date incorporated or Qualified  |  |   |
| Principal P  | Place of Business   | 2a. Mail  | ing Address  | \$  | 09/30/1994<br>4. FEI Number  |  | pplied For  |
|  |   | 26  |  | ······  | 65-0523265   | N  | ot Applicable   |
| Suite, Apt.  | #, etc.   | 27  | e, Apt. #, etc.  |   | 5. Certificate of Status Desired   | □ \$8.75<br>Fee B  | Additional<br>equired   |
| City & Stat  | 0   |   | & State  |   | 6. Election Campaign Financing<br>Trust Fund Contribution                                | \$5.00   | May Be<br>to Fees   |
| Zip  | Country<br>25   | Zip<br>29   |  | Country   | 8. This corporation owes or has  | Ana ' m  |   |
|  | 9. Name and Address of  |   | Agent  | 30  | Personal Property Tax due Jur<br>10. Name and Address of New F                           |  | No  |
| Saras  | Main Street<br>sota, FL 34237   | ,   |  | B3<br>B4 City   |  | FL III   | Code  |
| Saras<br>Pursuant<br>office or r<br>agent. I a   | to the provisions of Sections 6<br>egistered agent, or both, in the<br>m familiar with, and accept the  | 07.0502 and 607.15<br>9 State of Florida. Su<br>9 obligations of, Sect  | 08, Florida Statu<br>ch change was<br>lion 607.0505, Fl  | B4 City<br>tes, the above-named<br>authorized by the corp<br>lorida Statutes.   | corporation submits this statement for the<br>oration's board of directors. I hereby acc | FL III   |   |
| Saras<br>Pursuant<br>office or r<br>agent. I a<br>GNATURE  | to the provisions of Sections 60<br>egistered agent, or both, in the<br>im familiar with, and accept the<br>Signature typed or printed name of regist   | 07.0502 and 607.15<br>9 State of Florida. Su<br>9 obligations of, Sect  | 08, Florida Statu<br>ch change was<br>ion 607.0505, Fl   | B4 City<br>tes, the above-named<br>authorized by the corp<br>lorida Statutes.<br>TE Registered Agent signature  | equired when reinstating)  | PL purpose of changing I ept the appointment as  | ts registered<br>registered                                     |
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| Saras<br>Pursuant<br>office or r<br>agent. I a<br>GNATURE<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E  | sota, FL 34237<br>to the provisions of Sections 60<br>egistered agent, or both, in the<br>m familiar with, and accept the<br>Signature typed or printed name of regist<br>OFFICEF<br>VP<br>DURHAM, DOUGLASS<br>899 KNIGHTS TRAIL<br>NOKOMIS FL 34275<br>P<br>BORING, STEELE D<br>8037 MIDNIGHT PASS I<br>SARASOTA FL 34236<br>ST<br>PINSKI, J D<br>55 E. WASHINGTON ST                    | 07.0502 and 607.150<br>e State of Fiorida. Su<br>e obligations of, Sect<br>lered agont and title if apple<br>RS AND DIRECTORS         | DB, Florida Statu<br>ch change was<br>ion 607.0505, Fl<br>able (NO<br>DELETE<br>DELETE<br>DELETE   | B4     City       tes, the above-named<br>authorized by the corporation<br>forida Statutes.       TE     Registered Agent signature       13.     1.1 Title       1.2 NAME     1.3 STREET ADDRESS       1.4 City - ST-ZIP     2.1 Title       2.3 STREET ADDRESS     2.4 City - ST-ZIP       3.1 Title     3.2 NAME       3.3 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       4.1 Title       4.2 NAME       4.3 STREET ADDRESS       4.4 City - ST-ZIP       5.1 Title  | equired when reinstaling)<br>ADDITIONS/CHANGES TO OFF                                    | Purpose of changing i<br>purpose of changing i<br>ept the appointment as<br>DATE<br>ICERS AND DIRECTOF<br>Change<br>Change   | Is registered<br>registered<br>IS IN 12<br>Addition             |
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| Sarae Pursuant office or r agent. 1 a GNATURE E E E E E E E E E E E E E E E E E E  | Sota, FL 34237<br>to the provisions of Sections 6<br>egistered agent, or both, in the<br>m familiar with, and accept the<br>Signature typed or printed name of regist<br>OFFICEF<br>VP<br>DURHAM, DOUGLASS<br>899 KNIGHTS TRAIL<br>NOKOMIS FL 34275<br>P<br>BORING, STEELE D<br>8037 MIDNIGHT PASS I<br>SARASOTA FL 34236<br>ST<br>PINSKI, J D<br>55 E. WASHINGTON ST<br>CHICAGO IL 60602 | 07.0502 and 607.156<br>e State of Florida. Su<br>e obligations of, Sect<br>inted agont and title if apple<br>RS AND DIRECTORS<br>ROAD | DB, Florida Statu<br>ch change was<br>ion 607.0505, Fl<br>able (NO<br>DELETE<br>DELETE<br>DELETE<br>DELETE<br>DELETE<br>DELETE<br>DELETE | B4         City           tes, the above-named<br>authorized by the corport<br>orida Statutes.         Statutes.           TE: Registered Agent signature         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         3.3 STREET ADDRESS           3.4. City - ST-ZIP         4.1 Title           4.3 STREET ADDRESS         3.4. City - ST-ZIP           5.1 Title         5.2 NAME           5.3 STREET ADDRESS         4.4 City - ST-ZIP           5.1 Title         5.2 NAME           5.3 STREET ADDRESS         5.4 City - ST-ZIP           6.1 Title         6.2 NAME           6.3 STREET ADDRESS         5.4 City - ST-ZIP           6.1 Title         6.2 NAME           6.3 STREET ADDRESS         5.4 City - ST-ZIP | ADDITIONS/CHANGES TO OFF   | FL         purpose of changing i         pare         DATE         ICERS AND DIRECTOF         □ Change         □ Change | Is registered<br>registered<br>IS IN 12<br>Addition<br>Addition |

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