## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION

SIGNATURE:



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

	996	No.	DIVI:	SION OF CO	RPORATIONS				
OCUM Corporation N	Name	# <b>P9500</b> 0	0027261	(3)					
rincipal Place o	of Business		Mailing Addres	s			17 <b>00</b> 510 <b>33</b> 111 <b>00</b> 181		
1503 OLD SAYB			4503 OLD SA1						
AMPA FL 3362			TAMPA FL 336						
						3. Date Incorporated or Qu 04/06/1995	alified 3a.	Dale of Last Re	
Principal Plac	1		2a. Mailing Add		بمصاحا	4. FEI Number 59-33066	77	L+-	pplied For lot Applicable
<u> </u>	<u> </u>	n Highway_	26 4431 Suite, Apt.		Highway				Additional
Soite, Apr. #,	610.		27			5. Certificate of Status Des	ired		Required
City & State	1		City & State		r	Election Campaign Finar Trust Fund Contribution	icing		May Be
Tam	V [7]	Country	28 TAM	<u>)H</u>	Country	8. This corporation has liab			
3368 [	24	Ξ5 II.S. Α.	29 336	24 3	<u> ขึ้นรับ</u>	Florida Statutes	☑ Yes 🔲 N	0	
1	9. Name	and Address of Curren				10. Name and Address of	New Registe	red Agent	
					81 Name				
RYDBERG					82 Street A	iddress (P.O. Box Number is Not A	cceptable)		
500 E. KEI		.VD.			83				
SUITE 200 TAMPA FL								11 5	
	_ 33002				84 City		1	FLITI	Code
Pursuant to or registere familiar with	the provision the agent, or the agent, or the agent, and accept	ons of Sections 607.0502 both, in the State of Florio the obligations of Sect	2 and 607,1508, Flor da. Such change wa tion 607,0505, Florid	ida Statutes, is authorized a Statutes.	the above-named copy the corporation's to	rporation submits this statement for board of directors. I hereby accept		of changing its rent as registered	egistered offic agent. I am
	o the provision did agent, or to a accept ac	x printed name of registered agent	t and title if applicable.  ID DIRECTORS	POTE	the above-named copy the corporation's lace.	Irecio:	the purpose of the appointment o	AND DIRECTOR	RS IN 12
Pursuant to or registere familiar with SIGNATURE	o the provision agent, or the provision agent, or the provision acceptance of the provision and the provision agent agen	x printed name of registered agent	t and title if applicable.  ID DIRECTORS	Mesic	Polystered Agent signature re 13. 1.1 TITLE	oulred when reinstating  ADDITIONS/CHANGES	the purpose of the appointment o	1017G	
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