DOCUMENT # P95 000038679 1. Entry Name Townes E. Smalley, Jr., Inc. Procept Place of Business On ipley, FL 39428 On ipley,	200	o uniform bus	iness repo	TRC	(UBR)		FILED)		
Secretary of State Stanes Secretary of State 05-21-2001 50036 010 ***150.00 Secretary of State 05-21-2001 50036 010 **						\neg ,	May 21, 2001	8:0	00 am	
Principal Place of Business 9.44 Clarrol Court On ipley, FL 32428 Do Box, 523 Chipley, FL 32428 Solo, Apt. 4, sec. Do NOT WITTE IN THIS SPACE 1. Mailing Address Solo, Apt. 4, sec. Do NOT WITTE IN THIS SPACE City & Stace City & St										
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Supplementary Supplementar	Suite, Apt	. #, etc.	Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE			
Some Address of Current Registered Agent S. Name and Address of Current Registered Agent T. Name and Address of New Registered Agent Sireet Address (P.C. Box Number is Not Acceptable) City FL Zip Code 8. The above named entity submits this statement for the purpose of changing its registered either or registered agent, or both, in the State of Fiorida. SIGNATURE Signata Name Signata Name City FL Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Fiorida. SIGNATURE Signata Name or previous or previous or the purpose of changing its registered office or registered agent, or both, in the State of Fiorida. SIGNATURE Signata Name or previous or the purpose of changing its registered office or registered agent, or both, in the State of Fiorida. SIGNATURE Signata Name or previous or the purpose of changing its registered office or registered agent, or both, in the State of Fiorida. SIGNATURE Signata Name or previous or the purpose of changing its registered office or registered agent, or both, in the State of Fiorida. SIGNATURE Signata Name or previous or previous or the purpose of changing its registered office or registered agent, or both, in the State of Fiorida. SIGNATURE Signata Name or previous or the purpose of changing its registered office or registered agent, or both, in the State of Fiorida. SIGNATURES Signata Name or previous or purpose of the purpose of changing its registered office or registered agent, or both, in the State of Fiorida. 10. Election Campaign Fiorida. S.5.00 May Be Table Name or purpose of the Name of Name or purpose of the Name of Name or purpose of Name or pur	City & Sta	te	City & State		4. F	El Number 59-331 (23/3				
Smalley, James E. Jr. 9 Address (PC. Box Number is Not Acceptable) City FL Zip Code 1. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Fords. SIGNATURE Signath, typind or prime have of registered agent and title it applicable. DOTE: Registered Agenc agence registered agent, or both, in the State of Fords. SIGNATURE Comment of registered agent and title it applicable. DOTE: Registered Agenc agence registered agent, or both, in the State of Fords. SIGNATURE Comment of registered agent and title it applicable. DOTE: Registered Agenc agence registered agent, or both, in the State of Fords. SIGNATURE Comment of registered agent agence registered agent, or both, in the State of Fords. SIGNATURE Comment of registered agent agence registered agent, or both, in the State of Fords. SIGNATURE Comment of registered agent, or both, in the State of Fords. SIGNATURE Comment of registered agent, or both, in the State of Fords. SIGNATURE Comment of registered agent, or both, in the State of Fords. SIGNATURE Comment of registered agent, or both, in the State of Fords. SIGNATURE Comment of registered agent, or both, in the State of Fords. SIGNATURE Comment of registered agent, or both, in the State of Fords. SIGNATURE Comment of registered agent, or both, in the State of Fords. SIGNATURE Comment of registered agent, or both, in the State of Fords. SIGNATURE Comment of registered agent, or both, in the State of Fords. SIGNATURE Comment of registered agent, or both, in the State of Fords. SIGNATURE Comment of registered agent, or both, in the State of Fords. SIGNATURE Comment of registered agent, or both, in the State of Fords. SIGNATURE Comment of registered agent, or both, in the State of Fords. SIGNATURE Comment of registered agent, or both, in the State of Fords. SIGNATURE Comment of Registered agent, or both, in the State of Fords. SIGNATURE Comment of Registered	Zip	Country	Zip .	Count	try	ĺ	Pertificate of Status Desired			
Street Address (P.C. Box Number is Not Acceptable) Street Address (P.C. Box Number is Not Acceptable)					Name	7. N	ame and Address of New Registered A	gent		
B. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE Syntax hybrid or printed name of registered agent and the displication. (NOTE Registered Agent agreature required mem remaining) DATE SIGNATURE Syntax hybrid or printed name of registered agent and the displication. (NOTE Registered Agent agreature required mem remaining) DATE 10. Election Campaign Financing State Flue Flue Flue Flue Flue Flue Flue Flu	Smalley James E. Jr.				_					
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