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FLORIDA DEPARTMENT OF STATE

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| (| irt magazii | NE, INC. | | | | | | | 410 610 840 4 61 44 66 14 | 1 14 44 41 14 9 | | |
| Principal Place of | f Business | | Mailm | ng Address | | | | | | | | |
| 835 FAXHALL LAKELANE FL 33813 | | | 835 FAXHALL LAKELANE FL 33813 | | | | | | | | | |
| | | | | | | | | 3. Date Incor 05/25/ | porated or Qualified 1995 | 3a . Da | ite of Last Re | ood |
| . Principal Plac | e of Business | | ļ | failing Address | | | | 4. FEI Nombe | er | | 77 | pplied For ot Applicable |
| Suite, Apt. #, | etc | | } n | uite, Apt. #, etc. | | | | 5. Certificate | of Status Desired | | | Additional equired |
| City & State | | | | ory & State | ·· · | | | | ampaign Financing Contribution | | | May Be to Fees |
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| | 9. Name and | ddress of Curre | | red Agent | 1301 | | Name | 10. Name an | d Address of New | Registere | d Agent | |
| PM (BRUASA | DANIEI | | | | | 1 1 | Name | (D.O. Box Nu | mber is Not Accent | ablei | | |
| DUNHAM, DANIEL 835 FAXHALL LAKELANE FL 33813 | | | 83 | | | 82 | Street Addr | t Address (P.O. Box Nurriber is Not Acceptable) | | | | |
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Date: Clasting Stewar #