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| THE LAW RRM OF LAWRENCE J SPIEGEL CHRTD 343 ALMERIA AVENUE CORAL GABLES FI. 33134 144 Cry Man 1 Electron or registered Agent Sectors 607 0502 at 11 17 1508. Flunds Statutes, the above named corporation admins the statement for the purpose of charping its registered agent. Electron or registered agent. El | | ry Zip | | | | | |
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| 33 SALMERIA AVENUE CORAL GABLES FL 33134 44 Or | I'TIE LAW FIRM OF LAWRENCE J SPIEGEL CHRID 82 Street Address (P.O. Box Number is Not Acceptable) | | | | | | |
| 11. Pursuant to the products of Sections 607 0502 in 17,1508, Familia Statistics, the above named companies submits this statement for the purpose of changing its registered office or registrated of the companies of the com | | 343 ALMERIA AVENUE | | | | | |
| 11. Pursuant to the provisions of Sociens 607.0502 or 11177.1508, Florids Stabilities, the above named corporation saferities this statement for the purpose of changing risk and including was authorized by the corporation saferities the statement for the purpose of changing risk authorized by the corporation saferities the statement for the purpose of changing risk authorized by the corporation saferities the statement for the purpose of changing risk authorized by the corporation saferities the statement for the purpose of changing risk authorized by the corporation saferities the statement for the purpose of changing risk authorized by the corporation saferities the statement for the purpose of changing risk authorized changing risk authorized by the corporation saferities the statement for the purpose of changing risk authorized changing risk authorized by the corporation saferities the statement for the purpose of changing risk authorized changing risk authorized by the corporation of changes and the purpose of changing risk authorized changing risk authorized by the corporation saferities the statement for the purpose of changing risk authorized changing risk authorized by the corporation saferities the statement for the purpose of changing risk authorized changing risk authorized by the corporation saferities the corporation of changing risk authorized by the safety authorized by the corporation saferities the corporation of changing risk authorized by the safety and authorized by the saf | CUTAL GABLES PL 33134 | \ | | | | | |
| SIGNATURE | | | I I ' Plu | nn I | | | |
| SIGNATURE | Pursuant to the provisions of Section registered agent, or both, in the | ions 607.0502 an FN17.1508, Flo State of Florida, Silgn chango w | rida Statules, the above named corpor as authorized by the corporation's boa | ration submits this statement for the purpose ro of directors. Thereby accept the appointm | of changing its registered office | | |
| 12. OFFICE HS AND DIFFICIORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIFFICIORS IN 12 ITIE PSTD | C 2X | itions of Section 107,000s. Florid | ia Statutes. | 6/2/5/ | and the grant of t | | |
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| SIGNATURE: SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 430 191 (305) 387-2700 | | | | | | | |