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Sible	Principal P	Place of Business	AVE	26	1950 N	K/12	951	2	4. FEI Number	275	<u></u>	<del></del>
True! Fund Controlled in Addition of Pees   Additio	Suite, Apt.	#, etc. V 29		27		•			5. Certifcate of Status De	esired 🗆		
9. Name and Address of Current Registered Agent  10. Name and Address of New Registered Agent  11. Name  12. Street Address (P.O. Box Number is Not Acceptable)  13. Street Address (P.O. Box Number is Not Acceptable)  14. Address of Pools of Statutes, the above-named corporation submits this statement for the purpose of changing its registered cor or registered agent, or both, in the State of Florida. Such change was suthorted by the corporation's board of directors. I hereby accept the appointment as registered event, I am familiar with, and accept the obligations of, Section 607.8505, Florida Statutes.  11. TURE  11. TURE  11. TURE  12. TURE  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. TURE  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. TURE  13. TURE  14. TURE  15. TU	City & State	EAH, 1	7		y & State V. MIAMI	FL			Trust Fund Contribution	on LJ	Ad	ided to Fees
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Uniform to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered spent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby scoept the abplications of, Section 607.0505, Florida Statutes.  INTURE    Signature, typed or private name of registered agent and its of applicable.   PROFE Registered Agent stylesters required when rehealting)   DATE	1440 1951	NW I	12951					Address	(P.O. Box Number is Not	i Acceptable)		
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