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	CORPORATION	NAME(S) & DOCUMENT NUMB	ER(S)	, (if known):
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	Profit NonProfit	Amendment Resignation of R.A., Officer/ Director	r	8000029173581 -06/28/9901111008 ******35.00 ******35.00
	Profit NonProfit Limited Liability	Amendment Resignation of R.A., Officer/Directo Change of Registered Agent	r	-06/28/9901111008
4	Profit NonProfit Limited Liability Domestication	Amendment Resignation of R.A., Officer/ Directo Change of Registered Agent Dissolution/Withdrawal	r	-06/28/9901111008
	Profit NonProfit Limited Liability	Amendment Resignation of R.A., Officer/Directo Change of Registered Agent	r	-06/28/9901111008
	Profit NonProfit Limited Liability Domestication Other	Amendment Resignation of R.A., Officer/ Directo Change of Registered Agent Dissolution/Withdrawal	r	-06/28/9901111008
	Profit NonProfit Limited Liability Domestication Other OTHER FILINGS	Amendment Resignation of R.A., Officer/ Directo Change of Registered Agent Dissolution/Withdrawal Merger	r	-06/28/9901111008
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	Profit NonProfit Limited Liability Domestication Other OTHER FILINGS Annual Report Fictitious Name	Amendment Resignation of R.A., Officer/ Directo Change of Registered Agent Dissolution/Withdrawal Merger REGISTRATION/ QUALIFICATION Foreign Limited Partnership		

Examiner's Initials

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the
undersigned corporation organized under the laws of the State of
submits the following statement in order to change its registered office or registered agent, or both, in the
State of Florida.
1. The name of the corporation is: J. MICHAEL FARRUP, INC.
The state of the s
2. The mailing address of the corporation is: 521 70 th STREET
HOLMES BEACH, FL 34217
3. Date of incorporation/qualification: 6-6-96 Document number: P96000048440
4. The name and address of the current registered agent and office:
AMERILAWYER CHARTELED
3112 Almon, A August
COMPA, GORGES T. 33/34
THE COLUMN THE PROPERTY OF THE
3. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)
3909 EAST BAY DRIVE SUITE 110 FS
HOLMES BEACH, FL 34217
The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.
(Signature of an officer chairman or vice chairman of the hoard) (Option 1)
(Signature of an officer, chairman or vice chairman of the board) (Date)
J. MICHAEL FAARUP PRESIDENT
(Printed or typed name and title)
Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as
I further agree to comply with the provisions of all statutes relative to the proper and complete
registered agent.
Tan Allasken 1 35-99
YSignature of Registered Agent) (Date)
If signing on behalf of an entity:
BEN A. COOPER ACCOUNTANT
(Typed or Printed Name) (Capacity)

* * * FILING FEE: \$35.00 * * *

DIVISION OF CORPORATIONS

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