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ntity Name Canie な(O.	,		· New York	
tarijo v co.			FILED	
Mailing Address 31 Marblehead Ct. 7631 Marblehead Ct.		00 JUN 27 AM 11: 46		
				irkland, FL 3300
rincipal Place of Business	3. Mailing Address		The American	17
uite, Apt. #, etc.	Suite, Apt. #, etc.		- 6/13/100 ADDS 4/UID \$150	.U
ity & State	City & State		4. FE! Number A 7 Applied F	Cr
		College :	65.0680759 Not Applie	
p Country	Zip	Country	5. Certificate of Status Desired S8.75 Additional Fee Required	
6. Name and Address of C	Current Registered Agent	Name	7. Name and Address of New Registered Agent	
Sokolsky, Kenneth J.		Street Addre	ss (P.O. Box Number is Not Acceptable)	<del></del>
7301 A OW PALM	ietto PK KQ			
BOCA RATON, F	L 33433	City	FL Zip Code	
,		registered office or regi	stered agent, or both, in the State of Florida.	
End L	11.1		5.01.00	
Signature, typed or presided righte of registe	red agent and tille if applicable (NOT	E: Registered Agent signature req		
ils c <del>orporation</del> is eligible to sal <del>isfy its Int</del> x filling requirement and elects to do so. ee criteria on back)	After MAY 1120	IFFEE IS \$150.00 00 Fee will be \$550.0 de to Department of		
OFFICER CEO, preside	AS AND DIRECTORS	12.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	ddition
Biake, Karla	_	NAME	1	2010011
7631 Marblel Parkland, FC	neud Coke <del>rt</del> · 33067	STREET ADDRESS CITY-ST-ZIP		
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idicated on this report or supplemental r	eport is true and accurate and that n	ny signature shall have ti	Section 119.07(3)(i), Florida Statutes. I further certify that the information same legal effect as if made under oath; that I am an officer or direct	ctor
I the corporation or the receiver or truste hanged, or on an attachment with an ad	e empowered to execute this report	as required by Chapter (	607, Florida Statutes; and that my name appears in Block 11 or Block 1	12 if
	W MAL		11.12.101 056.345.1	7/2
HATURE: Larlo	E T. VINEL		7 18 UU 901 U 10 1	