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	lace of Business		Za. Maiii	ing Address	10 AL		4. FEI Number	Applied f	
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Suite, Apt.	#, etc.		Suite	e, Apt. #, etc.			5. Certifcate of Status Desired	\$8.75 Additio	
22			27		/		G. Carinotto C. Gallos Courtos	Fee Required	1
City & State	e		City	& State			6. Election Campaign Financing	\$5.00 May E	3e
23			28)				Trust Fund Contribution	Added to Fee	<u>s</u>
Zip	ζΛ [°]	Country 110	A Zip	_	Country		8. This corporation owes the current ye	ar Intangible	
24 322	S O 25	DIEN 03	29	3	o DUVA		Personal Property Tax.	☐ Yes 🖼 🗖 🗘 O	
	9. Name and	Address of Curre	ent Registered	Agent			10. Name and Address of New Regist	ered Agent	
					81 Nam		USEEN M 20	NGLEU	
Sus	EEN)	M .	LONG	ALEU	82 Stree	. Addm	as (P.O. Box Number is Not Acceptable)		
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					84 City	10	ok conville 0-10	85 Zip Code	
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11. Pursuant I	to the provisions o egistered agent, o	or Sections 607.05 r both, in the Stat	502 and 607.150 e of Florida. Su	JB, Florida Statutes ch chappe was auti	, the above-name horized by the cor	a corpor poration	ation submits this statement for the purpors board of directors. I hereby accept the	se of changing its registe appointment as registers	ared i
agent. I ar	m familiar with, an	d accept the obli	gations of Section	on 607/0505, Florid	la Spanyites.	. 1		0.0	
SIGNATURE	>,	usun T	n. しか	relly.	Pres	ide	m = 91231	49	İ
	Signature, typed or print				egistered Agent signatur	required y	then reinstating)	TE .	@
12.		OFFICERS A	AND DIRECTOR		13.		ADDITIONS/CHANGES TO OFFICER		
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