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2. Findplan Phase of Buildness       3. Mailing Address         Build, Ap. 4, etc       Sume, Apli, 9, dtc.       DO MOT WRITE: N1 1/H3 SPACE         City & State       City & State       Country       Zity       Country       Appin active of Space         Zity       Country       Zity       Country       4. Certificate distruct Network       Set 752014       Ippin Anglinship         Zity       Country       4. Certificate distruct Network       Set 752014       Ippin Anglinship         Miguel A. Marttin, Bsq.       Name and Address of New Registered Agent       Name and Address of New Registered Agent         Midati, Florida 33131       Div       FL       Stock Address (PO Example is Inversion)       Stock Address (PO Example is Inversion)         Add Britichters (PO Example is Inversion)       Stock Address (PO Example is Inversion)       Stock Address (PO Example is Inversion)       Stock Address (PO Example is Inversion)         Midati, Florida 33131       Div       FL       Zip Code         Stock Address (PO Example is Inversion)       Address (PO Example is Inversion)       Make to frees         Curve, Catlos       Stock Address (PO Example is Inversion)       Address (PO Example is Inversion)       Down         Stock Address (PO Example is Inversion)       Address (PO Example is Inversion)       Down       Down         Stock Address							600	)5329	Ì5
City & State     City & State     A EP Number     Applies For       7.0     Country     Zp     Country     S. Certificate of State Of S	2. Principal F	Place of Business	3. Mailing Address						
70     County     Zip     County     St. 75 Active and Address of Current Registered Agent     The Applicative and Address of New Registered Agent       Miguel A. Martin, Esq.     N. A. Martin & Associates, P.A.     Name     Name       Miguel A. Martin & Associates, P.A.     Bioci Address of New Registered Agent     Name       Miguel A. Martin & Associates, P.A.     Bioci Address of New Registered Agent     Name       Miguel A. Martin & Associates, P.A.     Bioci Address (P.D. Box Number is Not Acceptable)     Name       8. To above named entry submit the submeth for the purpose of changing its registered agent, or bon, in the addre of Florida.     St. 00 May Be       8. To above named entry aurous agent of the Laplaces     Office Campage Financing     Name       Potent work of New Provide Test (String agent and the Campage Financing)     Name and Address to Orthold Address of Orthold Address of Orthold Address of Orthold Address to Orthold Address of Orthold Address to Orthold Address of Orthol	Suite, Apt.	. #, etc. 1	Suite, Apt. #, etc.			DO NOT WRIT	TE IN THIS SP	ACE	
Zp       County       Zp       County       S. Certificate of Status Deviced       SR.75 Acceleration Fee Required Agent         Miguel A. Martin , Esg.       .	City & Stat	te	City & State					·	
Miguel A. Martin, Esg.     Name       Miguel A. Martin, Esg.     Street Address (P.O. Box Number is Nol Accentation)       Street Address (P.O. Box Number is Nol Accentation)     Street Address (P.O. Box Number is Nol Accentation)       848 Brickell Avenue, Suite 830     City     FL     Zip Cade       8. The slower rando only sub-the like statement for the purpose of changing its registered agent, or Doin, in the slate of Florida.     City     FL     Zip Cade       8. The slower rando only sub-the like statement for the purpose of changing its registered agent agent, or Doin, in the slate of Florida.     Immediate of Florida.     Immediate of Florida.       SIGNATURE     System insult for the purpose of changing its registered agent agent of the slate of Florida.     Immediate of Florida.     Immediate of Florida.       SIGNATURE     System insult for the purpose of the registered agent agent of the slate of Florida.     Immediate of Florida.     Immediate of Florida.       SIGNATURE     OFFICERS AND Diffections     Immediate of Florida.     Immediate of Florida.     Immediate of Florida.       10.     OFFICERS AND Diffections     Immediate of Florida.     Immediate of Florida.     Immediate of Florida.       11.     OUTP , Carlos     Outre, Carlos     Immediate of Florida.     Immediate of Florida.       12.     Officers And Diffections     Immediate of Florida.     Immediate of Florida.       12.     Deale     Immediate of Florida. </td <td>Zip</td> <td>Country</td> <td>Zip</td> <td>Country</td> <td></td> <td></td> <td></td> <td>8.75 Add</td> <td>litional</td>	Zip	Country	Zip	Country				8.75 Add	litional
Miguel A. Martin, Esg.       Since Address (P.O. Box Number is Not Accessible)         Since Address (P.O. Box Number is Not Accessible)       Since Address (P.O. Box Number is Not Accessible)         Since Address (P.O. Box Number is Not Accessible)       City       FL         Since Address (P.O. Box Number is Not Accessible)       City       FL       Zp Code         Since Address (P.O. Box Number is Not Accessible)       City       FL       Zp Code         Since Address (P.O. Box Number is Not Accessible)       City       FL       Zp Code         Since Address (P.O. Box Number is Not Accessible)       City       FL       Zp Code         Since Address (P.O. Box Number is Not Accessible)       City       FL       Zp Code         Since Address (P.O. Box Number is Not Accessible)       City       FL       Zp Code         Since Address (P.O. Box Number is Not Accessible)       City       FL       Zp Code         Since Address (P.O. Box Number is Not Accessible)       City       FL       Zp Code         Since Address (P.O. Box Number is Not Accessible)       City       City       City       City       City (P.O. Box Number is Not Accessible)         City (P.E. Soft)       Sp Code       Sp Code       Sp Code       Sp Code       Sp Code       Diff.         City (P.E. Code)       Sp Code		6. Name and Address of Current	Registered Agent	Nama	7. Name and	Address of New R	legistered Ag	ent	······
M. A. Martin & Associates, P.A.         648 Brickell Avenue, Suite 830         Miami, Florida 33131         City       FL         Stratework named entry submits this statement for the purpose of changing its registered agent, or both, bit he state of Florida.         Scourse towork named entry submits this statement for the purpose of changing its registered agent, or both, bit he state of Florida.         Scourse towork named entry submits this statement for the purpose of changing its registered agent, or both, bit he state of Florida.         Scourse towork name       Purpose of Avent synchronic agent in the state of Florida.         Scourse towork name       Purpose of Avent synchronic agent in the state of Florida.         Scourse towork name       Purpose of Avent synchronic agent in the state of Florida.         Scourse towork name       Purpose of Avent synchronic agent in the state of Florida.         State in Avent synchronic agent in the state of Florida.       Purpose of Avent synchronic agent in the state of Florida.         State in Avent synchronic agent in the state of Florida.       Purpose of Avent synchronic agent in the state of Florida.         State in Avent synchronic agent in the state of Florida.       Purpose of Avent synchronic agent in the state of Florida.         Miami, Florida 33129       Deter       The international agent agen	Micuel	L A. Martin, Esg.	<b>-</b>		and (D.O. Boy Alignet -				
Miami, Florida 33131       City       FL       Zp Code         8. The above named entry submits this statement for the purpose of changing its registered agent, or both, in the state of Florida.       Second Plant Statement for the purpose of changing its registered agent, or both, in the state of Florida.         SIGNATURE	M. A.	Martin & Associates,		Street Addre					
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SIGNATURE       Operative Name       Outer Represent Agent system representing       Image: Check Payable to Department of States         FILE IN COMP FEE IS \$6125       9. Election Campaging Financing Trust Fund Contribution       \$5.00 May Be Added to Pees       Mate Check Payable to Department of States         10.       OFFICERS AND DIFECTORS       11.       ADDITIONS/CHANGES TO OFFICERS AND DIFECTORS IN 10         11.       ADDITIONS/CHANGES TO OFFICERS AND DIFECTORS IN 10       Image: Check Payable to Department of States         13.       OFFICERS AND DIFECTORS       11.       ADDITIONS/CHANGES TO OFFICERS AND DIFECTORS IN 10         14.       OFFICERS AND DIFECTORS       11.       ADDITIONS/CHANGES TO OFFICERS AND DIFECTORS IN 10         14.       Ortice Change       Addition       Image: Change       Addition         15.00       Bay Shore Drive       Office States       Image: Change       Addition         15.01       Delate       Image: States Addition       Image: Change       Addition         15.02       Other States       Image: Change       Image: Change       Addition         15.02       Make Change       Image: Change       Image: Change       Image: Change       Image: Change         15.03       Make Change       Image: Change       Image: Change       Image: Change       Image: Change: Change	-					·····			
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STREET ADDRESS       STREET ADDRESS         CITY-ST-ZIP       CITY-ST-ZIP         INTLE       Delete         TITLE       Delete         NAME       STREET ADDRESS         STREET ADDRESS       CITY-ST-ZIP         It hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or true opwered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.	10. ITTLE VAME STREET ADDRESS CITY-ST-ZIP ITTLE VAME STREET ADDRESS CITY-ST-ZIP ITTLE VAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	FILE NOW: FEE IS \$61.25 OFFICERS AND DIF PD Cure, Carlos 805 S. Bayshore Dr Miami, Florida 331 VD De Almeida, Renato 805 S. Bay Shore I	9. Election Campaign Trust Fund Contribu RECTORS	Financing ution.       A         11.       TITLE NAME         STREET ADDRESS       CITY-ST-ZIP         TITLE       NAME         STREET ADORESS       CITY-ST-ZIP         TITLE       NAME         STREET ADDRESS       CITY-ST-ZIP	5.00 May Be dded to Fees	De	e Check Pa partment c (	of State CTORS IN Change Change	10 Addition
CITY-ST-ZIP       CITY-ST-ZIP         INTLE       Delete         VAME       TITLE         VAME       NAME         STREET ADDRESS       CITY-ST-ZIP         12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or true opwered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other fike empowered.	10. TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP	FILE NOW: FEE IS \$61.25 OFFICERS AND DIF PD Cure, Carlos 805 S. Bayshore Dr Miami, Florida 331 VD De Almeida, Renato 805 S. Bay Shore I	9. Election Campaign Trust Fund Contribu RECTORS	Financing ution       A         11.       TITLE NAME STREET ADDRESS CITY-ST-ZIP	5.00 May Be dded to Fees	De	e Check Pa partment c RS AND DIRE [	State CTORS IN Change Change	10 Addition  Addition  Addition  Addition  Addition
NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or truets on powered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered. 305	10. TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE VAME	FILE NOW: FEE IS \$61.25 OFFICERS AND DIF PD Cure, Carlos 805 S. Bayshore Dr Miami, Florida 331 VD De Almeida, Renato 805 S. Bay Shore I	9. Election Campaign Trust Fund Contribu RECTORS	Financing ution       A         11.       TITLE NAME STREET ADDRESS CITY-ST-ZIP         TITLE NAME STREET ADDRESS         CITY-ST-ZIP         TITLE NAME STREET ADDRESS         CITY-ST-ZIP         TITLE NAME STREET ADDRESS         TITLE NAME STREET ADDRESS         CITY-ST-ZIP	5.00 May Be dded to Fees	De	e Check Pa partment c RS AND DIRE [	State CTORS IN Change Change	10 Addition  Addition  Addition  Addition  Addition
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