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City FL Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Fordax SIGNATURE Signus sheet or remother of registered agent and remother or registered agent, or both, in the State of Fordax SIGNATURE 9. This corporation is eligible to satisfy its Intangable Task ling requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 states After MAY 1, 2000 Fee will be \$550.00 states 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE President STREET ADDRESS 17. 32.00 States 18. The Source of States 18. The Source of States 19. The Source of States 19. The Source of States 10. Street Address of States 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE President NAME STREET ADDRESS 17. 32.00 States 18. The Source of States 18. The States of States of States 18. The States of States of States 18. The States of States of States of States 18. The States of States of States 18. The States of States of States of States 18. The States of State	 				Name		Traine and Tr						7
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8. The above named entity submits this statement for the purpose of changing is registered office or registered agent, or both, in the State of Florida. SIGNATURE Signature Signatu	Mismi, FL	33/93	,						,				
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