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I hereby certify that the information supplied with this filin indicated on this report or supplemental report is true and of the corporation or the receiver or trustee empowered to	g does not qualify fo accurate and that r	or the exemp my signatur	ption stated in re shall have the	Section 1 ne same le	19.07(3)(i), Florida gal effect as if mac	Statutes. I furth le under oath:	her certify that t that I am an off	he information cer or director
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