Zip Country Zip Country S. Certificator (Status Desired) \$5.007.45.0 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent 7. Name and Address of New Registered Agent STEINBERG, PAUL B 767 ARTHUR GODPREY RD Name MIAMI BEACH, FL. 33140 Street Address (PC. Box Number is Not Acceptable) city FL Zip Country s. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE Street Address (PC. Box Number is Not Acceptable) Street Address (PC. Box Number is Not Acceptable) City Portice ingetand Agent by Street Agent in the State of Florida. Street Address (PC. Box Number is Not Acceptable) Street Address (PC. Box Number is Not Acceptable) City Street Address (PC. Box Number is Not Acceptable) City Street Address (PC. Box Number is Not Acceptable) City City (PC. Street Address (PC. Box Number is Not Acceptable) Street Address (PC. Box Number is Not Acceptable) City (PC. Street Address (PC. Box Number is Not Acceptable) Street Address (PC. Box Number is Not Acceptable) City (PC. Street Address (PC. Box Number is Not Acceptable) Street Address (PC. Box Number is Not Acceptable) City (PC. Street Address (PC. Box Number is Not Acceptable) Street Address (PC. Box Number is Not Acceptable)) FILED
Principal Place of Business Mailing Accless 740 OCEAN DR. 740 OCEAN DR. YIAO OCEAN DR. 740 OCEAN DR. 740 OCEAN DR. Siles ON Z. Principal Place of Business 3. Mailing Accless Sole. Apr. # alc DOI NOT Write IN THIS SPACE Zoir A State County Zo County A FEI Number SSTE SUBSERG, PAUL B SSTE SUBSERG, PAUL B Name and Address of Sums Desired SSTE SUBSERG, PAUL B STE TINBERG, PAUL B Tof 7 ARTHUR GODEREY RD Sole Address (PD. Box Numcer's Net Accretable) Store Address (PD. Box Numcer's Net Accretable) MIAMI BEACH, FL. 33140 Coving Tog Name and Address of New Registered Agent Name and Address of New Registered Agent STETINBERG, PAUL B Name and Address of Subsection of New Registered Agent Name and Address of New Registered Agent MIAMI BEACH, FL. 33140 Coving FL 200 Coving Store Numcer's Net Accretable) Store Numcer's Net Accretable) MIAMI BEACH, FL. 33139 Dott Mittee NTHOL Coving Plant Accel Agent Address (PD. Box Numcer's Net Accretable) Store Numcer's Net Accretable) MIAMI BEACH, FL. 33130 Dott Mittee Number's Agent Agent Address (PD. Box Numcer's Net Accretable) Store Numcer's Net Accretable) MIAMI BEACH, FL. 3	j i ⊑nauyi	VINENT# 2980000	91286		May 27, 2002 8:00 a
Principal Place of Business Mailing Address 740 OCEAN DR. 740 OCEAN DR. MIAMI BEACH, FL. 33139 Mailing Address Solie. Apl. e. ac Sule. Apl. e. ac Chy & Silie Sule. Apl. e. ac Corp & Silie Corp & Silie Zop Country 8. The active set of Suless of Current Registreed Agent Theme and Address of New Registreed Agent STE INBERG, PAUL B Team 767 ARTHUR GODPREY RD Steel Address (PO Box Number is Nex Addressed Agent MIAMI BEACH, FL. 33140 Steel Address (PO Box Number is Nex Addressed Agent MIAMI BEACH, FL. 33140 Corp Steel Address of Sum Suless Dott Purpose of changing its registered agent, or both. In the State of Flords. Steel Address of Suless OV(R): GE E Cov(x); FL Zip Co Cov Steel Address of New Registered Agent Cov (Cov); Steel Address of Suless OV(R): GE E Cov(x); FL Zip Co Cov Cov (Cov); Site Cov(R); Cov); <	SOE	3E SCANDALS, INC			
740 OCEAN DR. 740 OCEAN DR. MIAMI BEACH, FL. 33139 MIAMI BEACH, FL. 33139 2. Principal Pace of Business 3. Mailing Address Suite. Act. # etc. DO NOT Writte IN THIS SPACE Chr. # State City & State 20 Country 2. Principal Pace of Business 3. Mailing Address 200 Country 20 Country 20 Country 21 Country 22 Country 23 Country 24 Attrast end Address of Current Registered Agent 767 ARTHUR CODEREY RD MIAMI BEACH, FL. 33140 Steel Address (PO, Box Numbor is Not Acceptation) The above named entry submat this attement for the purpose of changing its registered after or registered agent, or both, in the State of Forda. IGMAURE Inter Address (PA) (PD, BOX Numbor is Not Acceptation) 314 City FL 25 PD Country 4 Manded Maderse of New Registered Agent ender agent, or both, in the State of Forda. IGMAURE Inter Address (PA) (PD, BOX Numbor is Not Acceptation) 100000 MANAGING MEMBERS 100000 MAL 11 Otext 11 Otext 12 Dotes					05-27-2002 90501 006 ***150.00
740 OCEAN DR. 740 OCEAN DR. MIAMI BEACH, FL. 33139 MIAMI BEACH, FL. 33139 2. Principal Pace of Business 3. Mailing Address Sule. Act. # etc. Sule. Act. # etc. City & State City & State 20 Country 4. Mailing Address Sule. Act. # etc. City & State City & State 20 Country 5. Centrocted Status Desired \$50.00 757 ARTHUR GODFREY RD Name 767 ARTHUR GODFREY RD Name 710 re above named entity submits this statement for the purpose of changing its registatered office or registatered agant. The above named entity submits this statement for the purpose of changing its registatered office or registatered agant. ADDITIONS /CHANGES Street Address (PO. Box Number is Not Acceptuble) City Play Number is Not Acceptuble) Intermeter Address of Registatered office or registatered agant. Coly PL 20 Col Street Address of Registatered office or on the registatered office or registatered agant. Coly Coly PL 20 Coly Number is Not Acceptuble) Intermeter Address of Registatered in Play Number is Registatered office or regis	Principal P	Place of Business			
MIAMI BEACH, FL. 33139 MIAMI BEACH, FL. 33139 2. Principal Pace of Business 3. Mailing Address Bure. Apl. 4, etc. Solite. Apl. 4, etc. City 4 State City 4 State Zp Country State Apl. 4, etc. State Apl. 4, etc. State The Application of State Desired Agent 7. Mame and Address of New Registered Agent State The Application of State Desired Agent 7. Mame and Address of New Registered Agent State Appl. 2 Discourse Agent agent and Address (PD. Box Number's Net Acceptable) MIAMI BEACH, FL. 33140 Steel Address (PD. Box Number's Net Acceptable) Charter and Address agent and the address Outre Registered Agent agent and agent on both in the State of Forida. CMATURE The above named entity submits this statement for the purpose of charaging is registated office a registered Agent agent and agent and agent on both in the State of Forida. CMATURE Oxit The above named entity submits this statement for the purpose of charaging is registated agent on both in the State of Forida. CMATURE Oxit<				מח	
Suite. Apt. #. etc. Suite. Apt. #. etc. DO NOT WRITE IN THIS SPACE City & State City & State City & State A FEI Number Zp Country Zp Country S. Cellstate of Status Desired \$5.00 A STE INBERG, PAUL B Country State Name Name State STE INBERG, PAUL B Name Name Name State Address of New Registered Agent STE INBERG, PAUL B Street Address (PO, Box Number is Not Adcressed Agent FE Regular The above named entity submits this statement for the purpose of changing its registered diffice or registered agent, or both, in the State of Florida GNA GNATURE GOMZ ALES, PASCAL CAM ILLE The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida GNATURE GOMZ ALES, PASCAL CAM ILLE POCTE Registered Agent Caroline science dates matching One Tracess Intermits Street Address (POLS Agent Caroline science dates matching) One Tracess Intermits Intermits Intermits MANAGING MEMBERS 10. ADD/TIONS/CHANGES Intermits Tracess Intermits Intermits Intermits Traces Intermits Intermits Intermits MANAGING MEMBER			39 MIAMI BE	ACH, FL. 33	139
City & State Country Schultage & State Country Schultage & State Country Schultage State Country Schultage State	2. Principa	al Place of Business	3. Mailing Address		
City & State Zip Country Zip Country S. Construction State Zip Country Zip Country S. Construction State Streinberg PAUL B Name Name Name 767 ARPHUR GODFREY RD Name Steed Address of Naw Registered Agent The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. CMAURE Express (PO, Box Number is Not Acceptable) MIAMI BEACH, PL. 33140 Steed Address (PO, Box Number is Not Acceptable) The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. CMAURE Express (PO, Box Number is Not Acceptable) MAMAGING MEMBERS / MEMBERS Name Strein Y and or state of states agent and flopiesed agent agent agent agent a	Suite, A		- Cuite And II		
City & state 4. FEI Number 2ip Country 2ip 6. Name and Address of Current Registered Agent 7. Name and Address of Current Registered Agent STEINBERG, PAUL B 7. Name and Address of Current Registered Agent 7.67 ARTHUR GODPREY RD MIAMI BEACH, FL. 33140 Street Address (PO. Box Number is Not Accessible) The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. GNAURE Gonzanta agent ad statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. GNAURE GonZALES, PASCAL CAMILLE 170 PD OCEAN DR GONZALES, PASCAL CAMILLE The state agent agent ad Codess 170 OCEAN DR Ordee MIAMI BEACH, FL. 33130 Intel MAMAGING MEMBERS/MEMERS 10. ADDITIONS/CHANGES 170 OCEAN DR Ordee MIAMI BEACH, FL. 33130 Intel MIAMI BEACH, FL. 33130 Off Strap MIAMI BEACH, FL. 33130 Off Strap Intel Change State Address Ocean Intel Change State Address Change State Address Change Intel Change State Address Change <t< td=""><td></td><td></td><td>Surre, Apt. #, etc.</td><td></td><td>DO NOT WRITE IN THIS SPACE</td></t<>			Surre, Apt. #, etc.		DO NOT WRITE IN THIS SPACE
20 Country Zp Country 6. Control Status Desired \$5.00 6. Name and Address of Current Registered Agent 7. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent STEINBERG, PAUL B 767 ARTHUR GODPREY RD Name Street Address (PO. Box Number is Not Acceptable) The above named entity submits his statement for the purpose of changing its registered agent, or both, in the State of Florida. City FL Zip Co GNATURE Street Address (PO. Box Number is Not Acceptable) City FL Zip Co MARAGING MEMBERS/MEMBERS Intel Matters City FL Zip Co MANAGING MEMBERS/MEMBERS 10. ADDITIONS /CHANGES Compare Address and Matters F1 ADDRES 10. ADDITIONS /CHANGES Change F1 ADDRES 10. MANAGING MEMBERS/MEMBERS 10. Change F1 ADDRES 10. MANAGING MEMBERS/MEMBERS 10. Change F1 ADDRES	City & Si	tate	City & State		4. FEI Number Applied For
	Zip	Country	Zip	Country	65-0877450 Not Applica
STEINBERG, PAUL B 7. Name 7. Name 767 ARTHUR GODFREY RD Name Street Address of New Registered Agent MIAMI BEACH, FL. 33140 City FL The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. City GMATURE Street Address (PC. Box Number is Not Acceptable) City The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. GMATURE GMATURE Burstein rises of private agent				Country	5. Certificate of Status Desired S5.00 Additional
STEINBERG, PAUL B Name 767 ARTHUR GODFREY RD Street Address (P.O. Box Number is Not Acceptable) MIAMI BEACH, FL. 33140 City The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. GNATURE			Registered Agent		7. Name and Address of New Registered Agent
MIAMI BEACH, FL. 33140 The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. GNATURE Sorraun, types or puried name of registered agent	STE	INBERG, PAUL B		Name	
City FL Zip Co The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. GNATURE				Street Addre	ss (P.O. Box Number is Not Acceptable)
The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Fiorida. GNATURE	1 1	Dunon, rb. 3314	U .		
The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Fiorida. GNATURE Sequeux, types of privid name of registered agent and the frequency of changing its registered agent, or both, in the State of Fiorida. GNATURE Sequeux, types of privid name of registered agent and the frequency of changing its registered agent, or both, in the State of Fiorida. GNATURE Sequeux, types of privid name of registered agent and the frequency of changes ANNAGING MEMBERS/MEMBERS IN ANNAGING MEMBERS/MEMBERS IN ANNAGING MEMBERS/MEMBERS IN ANNAGING MEMBERS/MEMBERS IN ANNAGING MEMBERS/MEMBERS IN ANNAGING MEMBERS/MEMBERS IN ANNAGING MEMBERS/MEMBERS IN ANNAGING MEMBERS/MEMBERS IN ANNAGING MEMBERS/MEMBERS IN ANNAGING MEMBERS/MEMBERS IN ANNAGING MEMBERS/MEMBERS IN ANNAGING MEMBERS/MEMBERS IN ANNAGING MEMBERS/MEMBERS IN ANNAGING ADDITIONS/CHANGES IN				City	
GNATURE Squature, typed of privided agent and the of application. (NOTE: Regresseries Agent agents and explaines requires when remaining) (ATE Squature, typed of privided agent and the of application. (NOTE: Regresseries Agent agents and explaines requires when remaining) (ATE Squature, typed of privided agent and the of application. (NOTE: Regresseries Agent agents and explaines requires when remaining) (ATE Squature, typed of privided agent and the of application. (NOTE: Regresseries Agent agents) (ATE MANAGING MEMBERS / MEMBERS 10. ADDITIONS/CHANGES GONZALES, PASCAL CAMILLE Delete THE Street Address (Change MIAMI BEACH, FL, 33139 (CTY-ST-2P) Indoness (TT-ST-2P) Indoness (TT-ST-2P) <th>The abov</th> <th>/e named entity submits this statement to</th> <th></th> <th>1 '</th> <th>FL Zip Code</th>	The abov	/e named entity submits this statement to		1 '	FL Zip Code
If ED PD IDelete Title ADDITIONS/CHANGES GONZALES, PASCAL CAMILLE, NAME STRET ADDRESS IChange 740 OCEAN DR IDelete Title NAME FETADORESS NIAMI BEACH, FL. 33139 ITTLE IChange E IDelete ITTLE IChange FETADORESS IDelete ITTLE IChange ST-2P IDelete ITTLE IChange FETADORESS IDelete ITTLE IChange ST-2P IDelete ITTLE IChange ST-2P IDelete ITTLE IChange ITTLE IDelete ITTLE IChange ST-2P IDelete ITTLE IChange IADORESS ITTLE IChange IChange ST-2P IDelete ITTLE IChange IADORESS IDelete ITTLE IChange IADORESS ITTLE IChange IChange IADORESS IDelete ITTLE IChange IADORESS ITTLE IChange IChange		MANAGING MEMBE	19 A A A A A A A A A A A A A A A A A A A	discourse a second second	
EET ADDRESS GONZALES, PASCAL, CAMILLE, STRET ADDRESS NAME -ST-2P MIAMI BEACH, FL. 33139 CITV-ST-ZP E Delete TILE NAME STRET ADDRESS CITV-ST-ZP ST-ZP Delete TILE NAME STRET ADDRESS CITV-ST-ZP ST-ZP Delete TILE NAME STRET ADDRESS CITV-ST-ZP ST-ZP Delete TITLE NAME STRET ADDRESS CITV-ST-ZP STRET ADDRESS CITV-ST-ZP Change I ADDRESS Delete TITLE NAME STRET ADDRESS CITV-ST-ZP I ADDRESS Delete TITLE NAME STRET ADDRESS CITV-ST-ZP I ADDRESS CITV-ST-ZP Change ST-ZP Delete TITLE NAME STRET ADDRESS CITV-ST-ZP I ADDRESS CITV-ST-ZP Change ST-ZP Delete TITLE NAME STRET ADDRESS CITV-ST-ZP I ADDRESS CITV-ST-ZP Change <td< th=""><th></th><th>PD</th><th>Delete</th><th></th><th></th></td<>		PD	Delete		
MIAMI BEACH, FL. 33139 CITV-ST-ZP E Oelete TITLE NAME STREET ADDRESS ST-ZP Oelete TADDRESS TITLE ST-ZP Oelete TADDRESS Oelete ST-ZP Oelete TADDRESS TITLE NAME STREET ADDRESS ST-ZP Oelete TADDRESS Oelete		GONZALES, PASCAL	CAMILLE ,		Change Addition
E Image: Change of the information supplied with this filing does not qualify for the exemption stated in Section 119 07/01/b. Elacted Crange Image: Change of the information supplied with this filing does not qualify for the exemption stated in Section 119 07/01/b. Elacted Crange	- ST-ZIP	317 3377	33120		
ET ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP Delete TTLE NAME STRET ADDRESS CITY-ST-ZIP ADDRESS ST-ZIP Delete TTLE NAME STRET ADDRESS CITY-ST-ZIP CITY-ST-		······································			
ST-2IP CITY-ST-2IP E Delete ET ADDRESS STREET ADDRESS ST-2IP Delete TADDRESS Delete ST-2IP Delete TADDRESS CITY-ST-2IP Delete ThLE NAME STREET ADDRESS ST-2IP Delete TADDRESS CITY-ST-2IP Delete TITLE NAME STREET ADDRESS ST-2IP Delete TADDRESS CITY-ST-2IP TADDRESS CITY-ST-2IP <	1		Delete	TITLE	
IT ADDRESS Image: Delete TITLE Image: Delete	E		🗖 Oelete	NAME	Change Addition
TADDRESS NAME ST-ZIP IDelete TADORESS ITTLE TADORESS STRET ADDRESS ST-ZIP IDelete TADORESS ITTLE STRET ADDRESS ITTLE STRET ADDRESS ITTLE STRET ADDRESS ITTLE I I I I I I I I I I I I I I I I I I I	E ET ADDRESS - ST- ZIP		Delete	NAME STREET ADDRESS	Change Addition
ST-2IP CITY-ST-ZIP I ADDRESS TTLE ST-ZIP I Defete I ADDRESS STREET ADDRESS ST-ZIP I Defete I ADDRESS CITY-ST-ZIP I ADDRESS CITY-ST-ZIP I ADDRESS IIILE STREET ADDRESS IIILE STREET ADDRESS IIILE STREET ADDRESS IIILE NAME STREET ADDRESS ST-ZIP I Defete I ADDRESS IIILE NAME STREET ADDRESS ST-ZIP I Defete NAME STREET ADDRESS CITY-ST-ZIP I Defete NAME STREET ADDRESS I-ZIP IIILE NAME STREET ADDRESS CITY-ST-ZIP IIIC NAME STREET ADDRESS CITY-ST-ZIP IIIIIE <	E ET ADDRESS - ST- ZIP			NAME STREET ADDRESS CITY-ST-ZIP	
I ADDRESS NAME ST-ZIP STREET ADDRESS ADDRESS CITY-ST-ZIP ADDRESS Delete T-ZIP Delete ADDRESS STREET ADDRESS T-ZIP Delete Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Change ADDRESS CITY-ST-ZIP ADDRESS Delete T-ZIP Delete I Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Change ADDRESS STREET ADDRESS I-ZIP Delete Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Change ADDRESS STREET ADDRESS I-ZIP STREET ADDRESS Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Change	ET ADDRESS ST-ZIP			NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	
TADDRESS NAME ST-ZIP Image Image STREET ADDRESS CITY-ST-ZIP Image Image Image	E ET ADDRESS - ST- ZIP ET ADDRESS	• • •		NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	
SI-2IP CITY-ST-ZIP I ADDRESS Delete T ADDRESS STREET ADDRESS ST-ZIP Delete I Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete I Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete I Delete TITLE NAME STREET ADDRESS T-ZIP STREET ADDRESS Hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07/29(i) Elocide Octover (from the stated in Section 119 07/29(i) Elocide Octover (from the stated in Section 119 07/29(i) Elocide Octover (from the stated in Section 119 07/29(i) Elocide Octover (from the stated in Section 119 07/29(i) Elocide Octover (from the stated in Section 119 07/29(i) Elocide Octover (from the stated in Section 119 07/29(i) Elocide Octover (from the stated in Section 119 07/29(i) Elocide Octover (from the stated in Section 119 07/29(i) Elocide Octover (from the stated in Section 119 07/29(i) Elocide Octover (from the stated in Section 119 07/29(i) Elocide Octover (from the stated in Section 119 07/29(i) Elocide Octover (from the stated in Section 119 07/29(i) Elocide Octover (from the stated in Section 119 07/29(i) Elocide Octover (from the stated in Section 119 07/29(i) Elocide Octover (from the stated in Section 119 07/29(i) Elocide Octover (from the stated in Section 119 07/29(i) Elocide Octover (from the stated in Section 119 07/29(i) Elocide Octover (from the stated in Sectio	E ET ADDRESS - ST- ZIP ET ADDRESS ST- ZIP		Delete	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition
I ADDRESS NAME Change ST-ZIP I Delete STREET ADDRESS ADDRESS III LE III LE ADDRESS STREET ADDRESS III LE NAME STREET ADDRESS IIII LE STREET ADDRESS<	E ET ADDRESS -ST-ZIP ET ADDRESS ST-ZIP	· · · · · · · · · · · · · · · · · · ·	Delete	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TTTLE NAME	Change Addition
T ADDRESS STREET ADDRESS ST-ZIP Delete T ADDRESS CiTY-ST-ZIP Delete TITLE NAME STREET ADDRESS T-ZIP STREET ADDRESS T-ZIP STREET ADDRESS In preby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07/29(i) Elocide On the section 119 07/29(i)	E ET ADDRESS - ST- ZIP ET ADDRESS ST- ZIP T ADDRESS	· · · · · · · · · · · · · · · · · · ·	Delete	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Change Addition
ADDRESS ADDRESS T-ZIP hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119 07/2Vi). Elorida Content of the section 119 07/2Vi).	E ET ADDRESS -ST-ZIP T ADDRESS ST-ZIP	· · · · · · · · · · · · · · · · · · ·	Delete Delete	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition
ADDRESS T-ZIP ADDRESS T-ZIP Change	E ET ADDRESS ST- ZIP T ADDRESS ST- ZIP T ADDRESS ST- ZIP	· · · · · · · · · · · · · · · · · · ·	Delete Delete	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TTTLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Change Addition
ADDRESS T-ZIP hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119 07/2V(). Elected Conversely (19)	T ADDRESS ST-ZIP T ADDRESS ST-ZIP I ADDRESS ST-ZIP ADDRESS	· · · · · · · · · · · · · · · · · · ·	Delete Delete	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Change Addition
CITY-ST-ZIP hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07/29/3). Elevide Contract in Section 119 07/29/3).	E ET ADDRESS -ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP		Delete Delete Delete Delete	NAME STREET ADDRESS CiTY- ST-ZIP TITLE NAME STREET ADDRESS CITY- ST-ZIP TITLE NAME STREET ADDRESS CITY- ST-ZIP TITLE NAME STREET ADDRESS CiTY- ST-ZIP	Change Addition
hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(2)(1) Elevide Center of the section of the sectio	E ET ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP		Delete Delete Delete Delete	NAME STREET ADDRESS CiTY- ST-ZIP TITLE NAME STREET ADDRESS CITY- ST-ZIP TITLE NAME STREET ADDRESS CITY- ST-ZIP TITLE NAME STREET ADDRESS CiTY- ST-ZIP TITLE NAME	Change Addition
mited liability company or the receiver or trustee empowered to execute this report as required by Chapter 60. The managing member or manager or	E ET ADDRESS -ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP ADDRESS ST-ZIP	••••	Delete Delete Delete Delete Delete	NAME STREET ADDRESS CITY-ST-ZIP 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 CITY-ST-ZIP	Change Addition
a standard by viewich bud. Fiorida Stantae	E ET ADDRESS -ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP ADDRESS T-ZIP ADDRESS T-ZIP	rtify that the information supplied with this	Delete Delete Delete Delete Delete Delete Delete	NAME STREET ADDRESS CITY- ST-ZIP 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 CITY- ST-ZIP	Change Addition
	T ADDRESS ST-ZIP T ADDRESS ST-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS -ZIP	rtify that the information supplied with this	Delete Delete Delete Delete Delete Delete Delete	NAME STREET ADDRESS CITY- ST-ZIP 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 CITY- ST-ZIP	Change Addition