Sigmund Holmes, In	VC		Secretary of S	
ai Place of Business	Mailing Address			
cipal Place of Business	3. Mailing Address		7.41066	
141 N.C. 44 STCeet e, Apt. #, etc.	214/ NC / Suite, Apt. #, etc.	44 STECCT	DO NOT WRITE IN THIS SPACE	
& State GATHOUSE POINT, FL	City & State Lighthouse;	POINT, FL	65-0984761 No	plied For t Applicable
64-7337 USA	zw 33064-7337	Country USA	5. Certificate of Status Desired See Required	
6. Name and Address of Curr	ent Registered Agent	Name	7. Name and Address of New Registered Agent	
He Southeast Third	Avenue, Suite	1700 Street Addr	ess (P.O. Box Number is Not Acceptable)	
N'ami, FL 33131				
•		City	FL Zip Code	e
above named entity submits this statemen	nt for the purpose of changing	its registered office or reg	istered agent, or both, in the State of Florida.	
Signature, typed or printed name of registered a	igent and title if applicable (N	OTE: Registered Agent signature re	quired when reinstating) DATE	
Signature, typed or printed name of registered a corporation is eligible to satisfy its Intang filing requirement and elects to do so.	pible FILE NOV	OTE: Registered Agent signature re WIII FEE IS \$150.00 2000 Fee will be \$550 able to Department of	10. Election Campaign Financing \$5.01 Trust Fund Contribution.	O May Be to Fees
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