SULF VENDING OF OCALA, INC.       05-23-2002 90050         Principal Place of Business       Mailing Address         2200 KE. 45TH STREET       2200 KE. 45TH STREET         OCALA FL 34479       OCALA FL 34479         2. Principal Place of Business       3. Mailing Address         Suite, Apt. #, etc.       Do Not WRITE IN THIS         Chy & State       4. FEI Number         6. Name and Address of Current Registered Agent       7. Name and Address of New Registered         6. Name and Address of Current Registered Agent       7. Name and Address of New Registered         CAVANAUGH, ERIC       Street Address of New Registered         44 S.E. 61ST COURT       City         OCALA FL 34472       City         City       FLE         SIGNATURE       In the state of point on both, in the State of Florida.         Signature, typed or preced rame of noguerod ages and the frie depletate.       (POIE Registered Agent direct or registered agent, or both, in the State of Florida.         Signature, typed or preced rame of adget ages and the frie depletate.       (POIE Registered Agent direct or registered agent, or both, in the State of Florida.         Signature, typed or preced rame of noguerod ages and the frie depletate.       (POIE Registered Agent direct or registered agent, or both, in the State of Florida.         Signature, typed or preced rame of noguerod ages and the frie depletate.       (POIE	SPACE	pplied For lot Applicable Iditional - ed -
280 N.E. 45TH STREET       2260 N.E. 45TH STREET         CALA FL 34479       OCALA FL 34479         2. Principal Place of Business       3. Mailing Address         Suite, Apt. #, etc.       Suite, Apt. #, etc.         City & State       City & State         City & State       City & State         6. Name and Address of Current Registered Agent       7. Name and Address of New Registered         CAVANAUGH, ERIC       Street Address (P.O. Box Number is Not Acceptable)         464 SE. 61ST COURT       Street Address (P.O. Box Number is Not Acceptable)         CAVANAUGH, ERIC       Street Address (P.O. Box Number is Not Acceptable)         Gity       FL         B. 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       Inter current and elects to do so.         Signature, typed or printed name of negative agent and the fl apoktome.       POTE flagstreed After May 1, 2002 Fee will be \$550.00         Make Check Payable to Department of State       10. Election Campaign Financing         Tax filing requirement and elects to do so.       Inter May 1, 2002 Fee will be \$550.00         Make Check Payable to Department of State       10. Election Campaign Financing         Tax filing requirement and elects to do so.       Inter May 1, 2002 Fee will be \$550.00 <td< th=""><th>SPACE</th><th>pplied For lot Applicable Iditional - ed • de de</th></td<>	SPACE	pplied For lot Applicable Iditional - ed • de de
280 N.E. 45TH STREET       2260 N.E. 45TH STREET         CALA FL 34479       OCALA FL 34479         2. Principal Place of Business       3. Mailing Address         Suite, Apt. #, etc.       Suite, Apt. #, etc.         City & State       City & State         City & State       City & State         6. Name and Address of Current Registered Agent       7. Name and Address of Naw Registered         6. Name and Address of Current Registered Agent       7. Name and Address of Naw Registered         CAVANAUGH, ERIC       Street Address (P.O. Box Number is Not Acceptable)         464 SE. 61ST COURT       City         OCALA FL 34472       City         B. 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       Supaura, types or prived name of regular and the fl applicable.         9. This corporation is eligible to satisfy its Intangible       Inter May 1, 2002 Fee will be \$550.00         Make Check Payable to Department of Statu       10. Election Campaign Financing         Tax filing requirement and elects to do so.       Make Check Payable to Department of Statu         9. This corporation is eligible to satisfy its Intangible       Tit         11.       OFFICERS AND DIFECTORS       12. ADDITIONS/CHANGES TO OFFICERS AN         13.       OFFICER	SPACE	pplied For lot Applicable Iditional - ed • de de
Principal Place of Business      Suite, Apt. #, etc.      DO NOT WRITE IN THIS      Suite, Apt. #, etc.      DO NOT WRITE IN THIS      City & State      City & State      City & State      City & State      Country      C	SPACE	pplied For lot Applicable Iditional - ed • de de
Principal Place of Business       S. Mailing Acturess         Suite, Apt. #, etc.       DO NOT WRITE IN THIS         City & State       City & State         City & State       City & State         City & State       City & State         Country       Zip         Country       Zip         Country       Zip         Country       S. Certificate of Status Desired         Suite, Apt. #, etc.       Country         6. Name and Address of Current Registered Agent       7. Name and Address of New Registered         Name       Name         CAVANAUGH, ERIC       Name         464 S.E. 61ST COURT       Street Address (P.O. Box Number is Not Acceptable)         464 S.E. 61ST COURT       City         OCALA FL 34472       City         City       FL         Signature, speat or printed name of registered agent and lite if applicable.       (NOTE Registered Agent signature required when reinstating)       DATE         IGNATURE       Signature, speat or printed name of registered agent and lite if applicable.       (NOTE Registered Agent signature required when reinstating)       DATE         IGNATURE       Signature, speat or printed name of registered agent and lite if applicable.       If LE NOW !!!! FEE IS \$150.00       10. Election Campaign Financing Trust Fund Contribution.	SPACE	pplied For lot Applicable Iditional - ed • de de
Solie, Apt. #, etc.       Columpse of columnation         City & State       City & State         2ip       Country         Marcine       S. Certificate of Status basified*         6. Name and Address of Current Registered Agent       7. Name and Address of New Registered         6. Name and Address of Current Registered Agent       Name         CAVANAUGH, ERIC       Street Address (P.O. Box Number is Not Acceptable)         464 S.E. 61ST COURT       City         OCALA FL 34472       City         City       FL         City       FL         Signature. typed or printed name of registered agent and the if applicable       (NOTE: Registered Agent signature required when reinstaling)       DATE         In this corporation is eligible to satisfy its Intangible       FLE NOW!!! FEE IS \$150.00       10. Election Campaign Financing         Tax filing requirement and elects to do so.       Make Check Payable to Department of State       Intue Fund Contribution.       Intue Fund Contribution.         1.       OFFICERS AND DIRECTORS       12.       ADDITIONS/CHANGES TO OFFICERS A	Agent	ditional ed  de de 00 May Be
City of black       Sp-3595467         Zip       Country       Zip       Country       S. Certificate of Status Desired*         6. Name and Address of Current Registered Agent       7. Name and Address of New Registered         6. Name and Address of Current Registered Agent       7. Name and Address of New Registered         6. Name and Address of Current Registered Agent       7. Name and Address of New Registered         6. Name and Address of Current Registered Agent       7. Name and Address of New Registered         CAVANAUGH, ERIC       Street Address (P.O. Box Number is Not Acceptable)         644 S.E. 61ST COURT       City         OCALA FL 34472       City         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.         IGNATURE       Signature, typed or privited name of registered agent and the if applicable.       (NOTE: Registered Agent signature required when reinstating)       DATE         1       This corporation is eligible to satisfy its Intangible       FILE NOW !!! FEE IS \$150.00       10. Election Campaign Financing Trust Fund Contribution.       Trust Fund Contribution.         1       OFFICERS AND DIRECTORS       12.       ADDITIONS/CHANGES TO OFFICERS AN         1       OFFICERS AND DIRECTORS       12.       ADDITIONS/CHANGES TO OFFICERS AN         1       OFFICERS AND D	SB.75_Ad Fee Require Agent	ditional ed  de de 00 May Be
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CAVANAUGH, ERIC 464 S.E. 61ST COURT OCALA FL 34472  City FL FL City FL FL City FL	•	00 May Be
OCALA FL 34472       City       FL         Signature, typed or printed name of registered agent and title if applicable.       (NOTE: Registered Agent signature required when reinstating)         DATE       Signature, typed or printed name of registered agent and title if applicable.       (NOTE: Registered Agent signature required when reinstating)         DATE       Signature equirement and elects to do so.       Atter May 1, 2002 Fee will be \$550.00       Trust Fund Contribution.         The       OFFICERS AND DIRECTORS       12.       ADDITIONS/CHANGES TO OFFICERS AND         Th	•	00 May Be
SIGNATURE       Signature, typed or printed name of registered agent and title if applicable.       (NOTE: Registered Agent signature required when reinstating)       DATE         9. This corporation is eligible to satisfy its Intangible       FILE NOW!!! FEE IS \$150.00       10. Election Campaign Financing         Tax filing requirement and elects to do so.       After May 1, 2002 Fee will be \$550.00       10. Election Campaign Financing         (See. criteria on back)       Make Check Payable to Department of State       11. Election Comparison Financing         11.       OFFICERS AND DIRECTORS       12. ADDITIONS/CHANGES TO OFFICERS AN         ITLE       PVPS       Delete       TITLE         SNOWS, OLIVER C       SNOWS, OLIVER C       STREET ADDRESS       STREET ADDRESS         2260 N.E. 45TH STREET       CITY-ST-ZIP       Delete       TITLE         ITLE       Delete       TITLE       STREET ADDRESS	\$5.0	
II.     OFFICERS AND DIRECTORS     I2.     ADDITIONS/CHANGES TO OFFICERS AND       ITLE     PVPS     □ Delete     ITTLE       IAME     SNOWS, OLIVER C     NAME       ISTREET ADDRESS     2260 N.E. 45TH STREET     STREET ADDRESS       OCALA FL 34470     □ Delete     ITTLE	Adde	a to rees
AME SNOWS, OLIVER C SNOWS, OLIVER C STREET ADDRESS 2260 N.E. 45TH STREET OCALA FL 34470 CITY-ST-ZIP CITY-ST-ZIP		
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TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP T3.' 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 or the the terms of the statutes of the statut	🔲 Change	