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| | DN, INC. | | | | ••• | | | | E TA BELIKI A FIN ALIER AL | 11 0 1 11 0 01 201 | | | | |
| Principat Place | of Business | | | Mailing Addre | 155 | | | | | | | | | |
| | Niversity di Ll FL 33351 | R | | ů. | RTHWEST 9 | TH STREET | r | | | | | | | |
| | | | | | | | | | Date Incorporated or C 07/26/1991 | lualified | 3a. Date c 0 | f Last R 4/21/1 | | |
| 2. Principal Pla | | 2a. Mailing Address 26 | | | | | 4. FEI Number 65-0282057 | | | | Applied For Not Applicab | le | | |
| Suite, Apt. : 22 | #, etc. | | | Suite, Apt | . #, e tc. | | | | 5. Certificate of Status De | sired | | \$8.75 Fee | Additional Required | |
| City & State | 3 | | | City & Sta | te | | | | 6. Election Campaign Fina Trust Fund Contribution | | | | 0 May Be d to Fees | |
| Zip 24 | | Country 25 | | Zıp 29 | | Cour 30 | ntry | | This corporation has lia Florida Statutes | bility for in | | under s | 199.032, | |
| | 9, Name | and Address | of Current R | legistered Age | nt | | 81 1 | lame | 10. Name and Address c | of New Re | gistered A | genl | | _ |
| FARR, ROBERT F. 1445 NORTHWEST 9TH STREET | | | | | | - | 82 S | Street Addr | ress (P.O. Box Number is Not / | Acceptable | e) | | | |
| | FL 33004 | | | | | 1 | 83 | | | | | | | |
| | | | | | | | 84 0 | Sity | | | FL | 8 5 Zi | p Code | |
| l or register | ea agent, or | ons of Sections both, in the Sta pt the obligation | te or Fiorida. | Such change w | as authorize | ed by the co | ve-nan orpora | tion's boa | ration submits this statement fo rd of directors. I hereby accept | r the purp the appoi | ose of chan ntment as re | ging its r gistered | egistered off agent. I am | ice |
| SIGNATURE _ | Signature, typed | or printed name of reg | stored agont and | the happicable. | (NOT | L Registered A | Agent sig | nature require | d when reinstating) | ····· | DATE | | | - |
| 12 . Title | D | OFFIC | CERS AND D | | DELETE | 13 . | | | ADDITIONS/CHANGES | TO OFFIC | | · · · · · · · · · · · · · · · · · · · | | |
| NAME | | , robert f. | | | | 1.2 NA | | | | | L.J | Change | Addition | |
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| NAME | | , Robert F. | | | | 2 2 NAS | ME | | | | Ľ. | | | |
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| appears in | Block 12 or | Block 13 if char | nged, or on a | in attachment w | ith an addre | ss. | 5U (U 6 | NOCUIO INI | s report as required by Unapte | r our, hor | iua Statutes | ; and tha | at my hame | |
| SIGNAT | URE: | Kobut | 800 | · | Kobe | kt 1 | F. F | ARR | 512 | lac | 954 | - 741 | -4/11 | |
| _ | | SIGNATURE ANI | TYPED OR PRI | INTED NAME OF SIG | NING OFFICER | OR DIRECTO | | | Date | | | ine Phone i | | |