2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 08, 2002 8:00 am
Secretary of State
05-08-2002 90073 039 ****50.00

DOCUMENT # M00000002261

1. Entity Name
HANCO INVESTMENTS, L.L.C. ✓

Principal Place of Business	Mailing Address
~~10350 MANCHESTER ROAD, SUITE 170~~ ~~ST LOUIS MO 63131~~	~~731 MARK WESLEY LANE~~ ~~BALLWIN MO 63021~~

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
731 Mark Wesley Ln		P O Box 280	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State: Ballwin MO		City & State: Ballwin MO	
Zip: 63021	Country: U.S.A.	Zip: 63022	Country: U.S.A.

4. FEI Number 43-1745771 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
JOHANNES, MICHAEL G 2733 BEACON COURT NAVARRE FL 32566	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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 ____________________
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $50.00
Make Check Payable to Department of State
Due By May 1, 2002

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MEM SOSKIN, TERESA M 731 MARK WESLEY BALLWIN MO 63021	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MEM SOSKIN, ALAN R 731 MARK WESLEY BALLWIN MO 63021	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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CR2E083 (9/01)

11. 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 certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Alan R. Soskin Member 4/24/02 314 220 0190
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #