## M18000003346

(Re	equestor's Name)
(Ad	ddress)
(Ad	ddress)
(Cir	ty/State/Zip/Phone #)
	WAIT MAIL
(Bu	usiness Entity Name)
(Do	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
	Office Use Only



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ALLAHASSEE

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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: 12000000088

Date:	06/04/2021	
Name:	Chris Vick	
	e #: <b>1378999</b>	
Entity Na	me: RANGERS GENE	RAL PARTNER, LLC
🗌 Ar	ticles of Incorporation/Authorization I	o Transact Business
Ar	nendment	
🖌 Cł	ange of Agent	
🗌 Re	einstatement	
Cc	onversion	
□ M€	erger	
📋 Di	ssolution/Withdrawal	
🗌 Fid	ctitious Name	
🗌 Ot	her	
Authorize Signature	ed Amount: <b>\$25.00</b>	

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PEUROPEAN HQ
COGENCY GLOBAL (UK) LIMITED
REGISTERED IS ENGLAND & WALLS
LOTIDON FC3N 3AX
+44 (0)20.3961.3080

 ASIA PACIFIC HQ COGENCY GLOBAL (HK) UMITED A HCHO KONG UMITED COMPANY UNIT 8, 14F, UPPO LEIGHTON TOWER 103 LEIGHTON RD, CAUSEWAY BAY HONG KONG P: +852.2682.9633 F: +852.2682.9790

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

	Principal office address of limited liability company:	(0	)	failing address of limited liability company
	( <u>Note: MUST BE STREET ADDRESS</u> )			( <u>Note: MAY BE POST OFFICE BOX</u> )
	No Change	-	No Chan	ige
	4/6/2018	-	MI	8000003346
	Date of filing/registration in Florida	4.		Document number
a)	CORPORATE CREATIONS NETWORK INC			
	Registered Agent and Registered Office shown on the records of the	e Florida	Dept. of State	
	801 US HIGHWAY 1			
	Registered Office Address (MUST BE FLORIDA STREET AL	DRESS	<u>.</u>	
				202
	NORTH PALM BEACH	33408		
}	COGENCY GLOBAL INC.			JUN -4 PH
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered O</u>	ffice add	<u>tress</u> :	PH I
	115 North Calhoun St., Suite 4			
	NEW Registered Office Address:			
		32301		

## /s/ Frederick D. McKalip

Signature of a member or authorized representative of a member

the articles of organization or the operating agreement of the limited liability company.

Printed or typed name of signee

Frederick D. McKalip

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

## /s/ Tim Mayville

Signature of Registered Agent

Tim Mayville, Assistant Secretary Division of Corporations• P.O. Box 6327• Tallahassee, FL 32314 FILING FEE: \$25.00