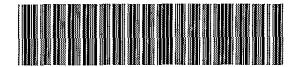
P00000097896

(Requestor's Name) (Address)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Emily Name)
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11/20/03--01016--002 **35.00



An Hacha

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporat	ions		+ +
SUBJECT:	BAKFLO TEK, INC.		
	(Name	of corporation)	
DOCUMENT NUMBER:_	P00000	097896	
The enclosed Statement of C	hange of Registered Offic	e/Agent and fee are	submitted for filing.
Please return all corresponde	nce concerning this matte	r to the following:	- 51
	Pamela E. Har	lacher	
,	(Nam	e of person)	
	Bakflo Tek, I	nc.	
	(Name of	firm/company)	
	P.O. Box 0701	3	-
	(/	Address)	
	Ft. Myers, FL		-
	(City/sta	te and zip code)	
For further information conce	erning this matter, please	call:	
Pamela E. Harlache		at (239	9 489-2309 rea code & daytime telephone number)
(Name	e of person)	(Ai	rea code & daytime telephone number)
Enclosed is a \$35.00 check n	nade payable to the Depar	tment of State.	
Mailing Address Amendment Sect Division of Corpo P.O. Box 6327 Tallahassee, FL	orations	1	Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Fallahassee, FL 32399

CR2E045(09/03)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

change is submitted for a corporation	607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of organized under the laws of the State of Florida in order tered agent, or both, in the State of Florida.
1. The name of the corporation:	BAKFLO TEK, INC.
2. The principal office address:	13391-113 Gateway Drive
	Ft. Myers, FL 33919
3. The mailing address (if different):_	P.O. Box 07013
	Ft. Myers, FL 33919
4. Date of incorporation/qualification:	10/16/2000 Document number: P00000097896
5. The name and street address of the of Florida Department of State:	current registered agent and registered office on file with the
Pam	ela E. Harlacher
133	91-113 Gateway Drive (P.O. Box 0701)
Ft.	Myers, FL 33919
(if changed):	new registered agent (if changed) and /or registered office
	(P.O. Box or personal mailbox NOT acceptable)
Ft.	Myers, FL 33908
The street address of its registered of changed will be identical.	fice and the street address of the business office of its registered agent, as
Such change was authorized by resol the board, or the corporation has been	ution duly adopted by its board of directors or by an officer so authorized by notified in writing of the change.
Samela E. Harlach	Pamela E. Harlacher 11/14/03 (Printed of typed name and fille)
I hereby accept the appointment as re I further agree to comply with the produties, and I am familiar with and ac being filed merely to reflect a change been notified in writing of this chang	egistered agent and agree to act in this capacity. Sylvisions of all statutes relative to the proper and complete performance of my cept the obligation of my position as registered agent. Or, if this document is in the registered office address. I hereby confirm that the corporation has
(Signature of Registered Age	tt) (Date)
If signing on behalf of an entity:	
(Typed or Printed Name)	(Canacital)

* * * FILING FEE: \$35.00 * * *