P0200032295

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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TRANSMITTAL LETTER

TO:	Amendment Section Division of Corporations						
SUBJ	ECT: Rankor Corp	- Comorat	ition)				
	(Name of corporation)						
DOC	UMENT NUMBER: P02000032295	- -					
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.							
Please return all correspondence concerning this matter to the following:							
	land C Dale	- -					
	Jeroid S. Bake						
	(Name of person)						
	Rankor Co						
	(Name of fire	n/compa	oany)				
	1022 Richmo	ond Ave	e. N.				
	(Adda	ress)					
	Lehigh Acres,	FL 3397	72				
(City/state and zip code)							
For further information concerning this matter, please call:							
1 OI IUI	mer information concerning this matter, prease can.	•-					
	Jerold S. Bakelman	<u> </u>	at (239) 368-9055 (Area code & daytime telephone number)				
	(Name of person)		(Area code & daytime telephone number)				
Enclosed is a \$35.00 check made payable to the Department of State.							
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	<u>2</u> 	Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399				

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

change is submi	tted for a corporation organized under the la	*	in order
to change its reg	gistered office or registered agent, or both, it	r the State of Florida.	
1. The name of t	he corporation: Rankor Corp.	<u>-</u>	
2. The principal	office address: 1022 Richmond Ave. N., Le	ahlgh Acres, FL. 33972	

3. The mailing a	ddress (if different):	<u> </u>	
		<u> </u>	
Date of incorp	poration/qualification: 3/25/02	Document number: P02000032295	
	street address of the current registered agent tment of State:	t and registered office on file with the	OL MAR
	Robert Bowers	A	
	23 Colorado Rd.	- S	S
	Lehigh Acres, FL.	33 <u>9</u> 36 -n	ME SI
6. The name and (if changed):	street address of the new registered agent (it	f changed) and /or registered office	AIE
	Jeroid S. Bakeim	nan	
	1314 Homestead	d <u>Rd</u> . N.	
	(P.O. Box or personal mailb	on NOT acceptable)	
	Lehigh Acres, FI	L 33936	
The street addre changed will be	ss of its registered office and the street add identical.	dress of the business office of its registered a	agent, as
Such change wa the board, or the	s authorized by resolution duly adopted by corporation has been notified in writing of	its board of directors or by an officer so au f the change.	thorized by
Juna J	gnature of an officer or director)		sident
•	• /	gree to act in this capacity. The relative to the proper and complete perform my position as registered agent. Or, if this ce address, I hereby confirm that the corpor	mance of my document is ration has
	Signature of Registered Agent)	[Date)	
If signing on bel	nalf of an entity;		
	•		
	(Typed or Printed Name)	(Capacity)	

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