

P02000045280

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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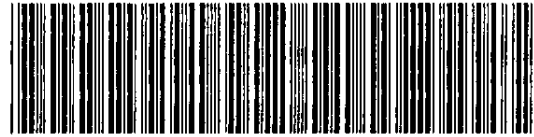
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

RPA/RO/chg
@ 6/23/11

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: A & N LEASING INC.
2. The principal office address: 6333 SW STATE RD 200
OCALA FLORIDA 34476
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 4/19/2002 Document number: P02000045280
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

RUSSELL E MAYBAUM

6333 SW HWY 200

OCALA FL 34476

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

LORENZO RAMUNNO, ESQ

7500 SW 61 AVE SUITE 100

P.O. Box NOT acceptable

OCALA FL 34476

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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Annette Maybaum
Signature of an officer or director

ANNETTE MAYBAUM
Printed or typed name and title

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Lorenzo Ramunno
Signature of Registered Agent

06-18-2011
Date

If signing on behalf of an entity:

LORENZO RAMUNNO
Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)