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SECRETARY OF STATE DIVISION OF CORPORATIONS 2017 SEP 10 AM 9: 34

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## **COVER LETTER**

Division of Corporations
SUBJECT: The Blenken Financial aroun (Name of Corporation)
DOCUMENT NUMBER: 120700012108
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:
(Name of Contact Person)
THE BLANKEN FINANCIAL Group (Firm/Company)
2101 Starper Rd. Ste F-18 (Address)
LARCO, FL 33771 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person)  (Name of Contact 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

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

TO:

Amendment Section

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

statement of chang	e is submitted	for a corporation	617.0502, 607.1508, or 6 on organized under the law or registered agent, or bot	ws of the State of _	FURSOA
1. The name of the	J				cial aroup.
2. The principal of			Starker	RJ.	
	ARGO.	FL	33771	, ,,	
3. The mailing add		nt): SA			
J. The maning add	1035 (11 0111010	,.	, , -	· .	
4. Date of incorpor	ation/qualifica	ation: \-7	6-67 Document	number: Pog	80121000
			istered agent and registere		
Florida Departm	ent of State:	`		,	
		1254	JAW 13	SLALKEL	J
	,	2101	STARKEY	Ro.	F-18
<del></del>		۸.۵.	, · · ·	22771	-
	(	ARGO	1-C	33111	-
(if changed):  —		(P.O. Box NOT	Accompanie)		SECRETARY IVISION OF CO 2001 SEP 10
		(1:0: 100: 1101	acceptable)		AN OF S
			ne street address of the board of		s registered agen
authorized by the	board, or the	corporation has	adopted by its board of been notified in writing	of the change.	Officer 30
(3)	M		( ) Hr.	55 TAN	BLALICE &
` •	of an officer or dire e appointmen comply with to am familiar filed merely seen notified in	•	agent and agree to act in fall statutes relative to to t the obligation of my pon nge in the registered offic change.	nted or typed name and this capacity, he proper and consition as registered address, I herel	, 10 10 10 10 10 10 10 10 10 10 10 10 10
	Jer			8-29.	-07
(Signa	ure of Registered.	Agent)	<del></del>	(Date)	
If signing on beha	If of an entity  Sフェル	~ B	LANKEN		

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