(Re	questor's Name)		•		
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COVER LETTER

TO: Amendmen Division of	nt Section f Corporations		
SUBJECT:	GANOC Name of	O, INC. Corporation	
DOCUMENT NU	MBER:PS	98000088466	_
The enclosed States	ment of Change of Registered Off	fice/Agent and fee are submitted for	r filing.
Please return all co	rrespondence concerning this mat	ter to the following:	-
	1	C	
	Jan	ice Null	
•	Name of C	Contact Person	
		ervices, Inc. Company	
	1.1111/	Company	
	375 N. Stenha	nie St., Suite 1411	
	A	ddress	
	Henderson, f	NV 89014-8909 and Zip Code	
	City/State	and Zip Code	
	ianice.null@	@incorp.com	
_	E-mail address: (to be used for	r future annual report notification	n)
For further informa	tion concerning this matter, pleas	e call:	
	Janice Null	. 702 \ 966.25	100 aut 6505
Nan	ne of Contact Person	at (<u>702</u>) <u>866-25</u> Area Code & Daytime Tel	lephone Number
Enclosed is a \$35.0	0 check made payable to the Dep	artment of State.	
	Malling Adduses	Church Adduson	
	Mailing Address: Amendment Section	Street Address: Amendment Section	
	Division of Corporations	Division of Corporat	tions
	P.O. Box 6327	Clifton Building	
	Tallahassee, FL 32314	2661 Executive Cen	ter Circle

Tallahassee, FL 32301

TO:

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida ange is submitted for a corporation organized under the laws of the State of $\underline{\underline{\underline{\underline{\underline{f}}}}}$ er to change its registered office or registered agent, or both, in the State of $\underline{\underline{\underline{f}}}$	Florida
1. The name of t	the corporation: GANOCO, INC.	
2. The principal	office address: 2323 Curlew RD., Suite 7C	
Dunedin, F	FL 34698	
3. The mailing a	address (if different):	<u></u>
4. Date of incorp	poration/qualification: 10/15/1998 Document number: F	98000088466
	d street address of the current registered agent and registered office on file wirtment of State: (If resigned, enter resigned)	th the
	KLEIN, STEPHEN DAVID	_
	2323 Curlew RD., Suite 7C	
	Dunedin FL 34698 US	- 7A C 21
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered of	2009 NOV 16 SECHETARY ALLAHASSE
	Incorp Services, Inc.	177 5
	17888 67th Court North P.O. Box NOT acceptable	
	P.O. Box NOT acceptable Loxahatchee, FL 33470	PMID: 17 OF STATE. OF LORIDA
The street addre	ess of its registered office and the street address of the business office of i l be identical.	ts registered agent,
Such change was authorized by	as authorized by resolution duly adopted by its board of directors or by ar he board, or the corporation has been notified in writing of the change.	ı officer so
Signatu	Land Wright Printegor typed name and t	itle
I further agrée i of my duties, an document is bei	t the appointment as registered agent and agree to act in this capacity. To comply with the provisions of all statutes relative to the proper and coind I am familiar with and accept the obligation of my position as registere ing filed merely to reflect a change in the registered office address, I here is been notified in writing of this change.	mplete performance ed agent. Or, if this
Janic	e Dull 10/7/	09
on behalf If signing on be	enature of Registered Agent For Incorp Services, Inc., ehalf of an entity:	
Janice Nu	ull for Incorp Services, Inc.	

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

Typed or Printed Name