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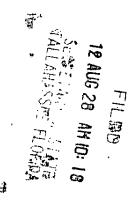
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COVER LETTER

Division of Corporations			
SUBJECT: Talkkids Inc Name of Corporation			
Name of Corporation			
DOCUMENT NUMBER: P9900063094			
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:			
Des Hon's Levin Name of Contact Person			
Name of Contact Person			
Firm/Company			
500 E. BROWARD Blvd #1650			
Address			
Firm/Company 500 E. BROWARD Blvd #1650 Address Thouserdale, \$1 33394 City/State and Zip Code			
City/State and Zip Code			
lia, cotalk, edu			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Lia Civola Ni Name of Contact Person at (954) 565 8505 X 204 Area Code & Daytime Telephone Number			
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 Street Address: Amendment Section Division of Corporations Clifton Building			
Tallahassee FL 32314 2661 Executive Center Circle			

Tallahassee, FL 32301

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 Fig. 1.
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Talkkids, Inc
1. The name of the corporation.
2. The principal office address.
FORT Landerdale, 4. 93394
3. The mailing address (if different):
4. Date of incorporation/qualification: Document number:
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)
DESMOND LEVIN
2455 E SUNDISC Blud # 200
FORT Landerbale \$1.93304
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
500 E. Blowned Blud, # 1650
FT. Lausebale 4. 33394
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 of the corporation has been notified in writing of the change.
Signature of an officer of director Signature of an officer of director Signature of an officer of director 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.
8/20/2012
Signature of Registered Agent Date
If signing on behalf of an entity:
Typed or Printed Name

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