## 1020006357

(Requestor's Name)			
(Address)	300214568573		
(Address)			
(City/State/Zip/Phone #)			
(Business Entity Name)	11/30/1101016010 **35.00		
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:	MIL MOV 30 M		
<b> </b>	Mo: 5		

Office Use Only



## **COVER LETTER**

TO: Amendment Secti Division of Corpo	on orations		
SUBJECT:	Ark Financial Se	ervices, Inc.	<del></del>
DOCUMENT NUMBER	E00/	000006357	
	f Change of Registered Office	e/Agent and fee are sub	mitted for filing.
	ndence concerning this matter		C
	Donald		
	Name of Cor	ntact Person	
	Ark Financial	Services, Inc.	
	Firm/Co		<del></del>
	925 S. Federal		
	Add	ress	
<del></del>	Boca Raton City/State ar	, FL 33432	
	City/State at	iu zip code	
	dshek@dawso		
E-mai	l address: (to be used for f	uture annual report no	tification)
For further information co	oncerning this matter, please of	call:	
Don	ald Shek	at ( 561 )	391-5555 ytime Telephone Numbe
Name of C	Contact Person	Area Code & Da	ytime Telephone Numbe
Enclosed is a \$35.00 chec	k made payable to the Depart	ment of State.	
<u>N</u>	Mailing Address:	Street Addre Amendment	ess:
	Division of Corporations		Corporations
	O. Box 6327	Clifton Buil	•
Т	Callahassee, FL 32314	2661 Execu Tallahassee	tive Center Circle FL 32301

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## 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 Delaware in order to change its registered office or registered agent, or both, in the State of Florida.	-
1. The name of the corporation: Ark Financial Services, Inc.	
2. The principal office address: 925 S. Federal Hwy, Suite 600 Boca Raton, FL 33432	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 12-23-2002 Document number: F02000006357	
<ol><li>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)</li></ol>	
Albert J. Poliak-(Resigned)	
925 S. Federal Hwy, Suite 600	
Boca Raton, FL. 33432	um.
Boca Raton, FL. 33432  6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	diament of the second
Donald Shek	A SOUTH
925 S. Federal Hwy, Suite 600	
P.O. Box NOT acceptable  Boca Raton, FL. 33432	
The street address of its registered office and the street address of the business office of its registered agent as changed will be identical.	ıt,
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 any officer or 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 performant of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if the 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.	ce iis ie
//On ald flow November 29, 2011  Signature of Registered Agent Date	_
If signing on behalf of an entity:	
Donald Shek Typed or Printed Name	

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