

K 53187

Ann Hill Smith Thompson
Requestor's Name

Address

City/State/Zip

Phone #

893-4105

Office Use Only

FILED
99 SEP 21 AM 11:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time _____
- ☐ Mail out ☐ Will wait ☐ Photocopy

- ☐ Certified Copy
- ☐ Certificate of Status

RECEIVED
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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input checked="" type="checkbox"/>	Amendment
<input checked="" type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

C. COULLETTE SEP 21 1999

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

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-09/21/99--01006--015
*****35.00 *****35.00

Examiner's Initials

**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, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation is: C.M.K., INC.
2. The mailing address of the corporation is: 2997 Apalachee Parkway, Tallahassee, FL 32304
3. Date of incorporation/qualification: 12/16/8 Document number: K53187
4. The name and address of the current registered agent and office:

THOMAS E. FOTOPULOS

315 East Madison St.

Tampa, FL 33602

5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)

SUSAN S THOMPSON, PRESIDENT

SMITH, THOMPSON + SHAW, P.A.

3520 THOMASVILLE ROAD, 4TH FLOOR TALLAHASSEE, FLA.

The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical. 32304

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.

MJwan
(Signature of an officer, chairman or vice chairman of the board)

9/20/99
(Date)

MAHOO JIVAN PRESIDENT.
(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, 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.

Susan S Thompson, President
(Signature of Registered Agent)

9/20/99
(Date)

If signing on behalf of an entity:

Smith Thompson + Shaw, P.A.
(Typed or Printed Name)

President
(Capacity)

SUSAN S. THOMPSON

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