


2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 21, 2003 8:00 am
Secretary of State

04-21-2003 90116 022 ****50.00

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DOCUMENT # L02000013412	
1. Entity Name RK INTERNATIONAL, LLC	

Principal Place of Business 35-D GULF BREEZE PARKWAY GULF BREEZE FL 32561	Mailing Address 35-D GULF BREEZE PARKWAY GULF BREEZE FL 32561
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



☒ CHECK HERE IF MAKING CHANGES

4. FEI Number 04-3693570		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent HIGHTOWER, DAVID E 3 WEST GARDEN ST., SUITE 700 PENSACOLA FL 32501
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7. Name and Address of New Registered Agent	
Name MICHAEL E. GERKIN	
Street Address (P.O. Box Number is Not Acceptable) 35-D GULF BREEZE PARKWAY	
City GULF BREEZE	FL Zip Code 32561

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE MICHAEL E. GERKIN <small>Signature, typed or printed name of registered agent and title if applicable.</small>	<i>Michael Gerkin</i> FEB. 26, 2003 <small>(NOTE: Registered Agent signature required when reinstating) DATE</small>

FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2003	
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9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.	
SIGNATURE: <i>Michael Gerkin</i> MICHAEL E. GERKIN <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>	Date 2/26/03 <small>Daytime Phone #</small>

CR2E083 (10/02)