L02000031272

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Moyliylox

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company 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 limited	d liability company is:	MKRCK,	LLC		
2. The mailing address of				Lane,	
			Orange City, FL		
11/21/2002			L02000031272		
3. Date of filing/registration in Florida		4. Document number			
5. The name of the registe Florida Department of S	red agent and the regis State: Lawton R Jackson	stered office	address as shown o	on the records	of the
	2311 S.W. 24TH S	Name TREET			
	MIAMI FL 33145	Address State and Z	in	0.0	<u> </u>
6. The name and address of	• •		•	04 APR	1510al
Tom Smith		2	SE CE		
	2765C Rebecca La	Name ine		AH 8:	
•	Florida street address	s (P.O. Box	NOT acceptable)	28	=
	Orange City,	FL 3276	3		(·
	City, S	State and Zip)		
If the limited liability come confirmed that after the chand the business office of liability company, it is her the members of the limited the operating agreement of the limited the operating agreement of the limited the operating agreement of signature of a member or authority of the limited that the operating agreement of the limited that th	nange or changes are methe registered agent with the confirmed that the disability company or af the limited liability of the	nade, the Flo ill be identic e change(s) v as otherwise ompany.	ws of the State of Forida street address cal. Or, in the case was/were authorized provided in the ar	Florida, it is he of the register of a Florida le d by an affirm ticles of organ	ereby red office imited native vote of nization or
TOM SMITH					
(Printed or typed name of signee)					
I hereby accept the appoint comply with the provision and I am familiar with and Chapter 608, F.S. Or, if the address, I hereby confirm (Signature of Registered Agent)	intment as registered a s of all statules relative d accept the obligation his document is being that the limited liabilit	gent and ag e to the proj is of my pos filed to mer ty company	ree to act in this ca per and complete p ition as registered a ely reflect a change has been notified in	pacity. I furt erformance o agent as prov in the regist n writing of th	her agree to f my duties, ided for in ered office iis chänge.

FILING FEE: \$25.00

INHS18(10/99)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314