

L06000017782

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☒ MAIL

(Business Entity Name)

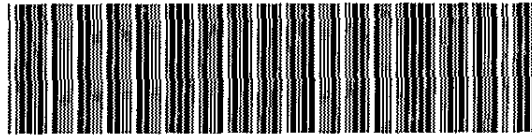
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

MAIL Out
Change RA Address
only

Office Use Only



500078988315

09/06/06--01013--019 **25.00

FILED

06 SEP -6 AM 9:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

2006 SEP -6 AM 11:30

TO ACKNOWLEDGE
SUFFICIENCY OF FILING

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: FMRKT, LLC

(Name of Corporation)

DOCUMENT NUMBER: L06000017782

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:

Alex Karis

(Name of Contact Person)

FMRKT, LLC

(Firm/Company)

25400 U. S. 19 North, Suite 185

(Address)

Clearwater, FL 33

(City/State and Zip Code)

For further information concerning this matter, please call:

Alex Karis



(Name of Contact Person)

at (617) 755-6300

(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
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

FILED
06 SEP - 9 AM 9:46
TALLAHASSEE, FL
SECRETARY OF STATE

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

608.416 or 608.508

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 Florida, USA in order to change its registered office or registered agent, or both, in the State of Florida.

LLC

1. The name of the ~~corporation~~ organization: FMRKT, LLC

2. The principal office address: 25400 U. S. 19 North, Suite 185
Clearwater, FL 33755

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 2-09-2006 Document number: L06000017782

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Alex Karis

601 Cleveland Street, Suite 340

Clearwater, FL 33755

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Alex Karis

25400 U. S. 19 North, Suite 185

(P.O. Box NOT acceptable)

Clearwater, FL 33763

FILED
06 SEP -6 AM 9:46
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

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, or the corporation has been notified in writing of the change.

Alex Karis
(Signature of an officer or director)
member

Alex Karis President
(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.

(SEE ABOVE)

(Signature of Registered Agent)

(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (8/05)