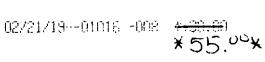
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S. YOUNG

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: PK 35 Contracting LLC Name of Limited Ciability Company
Dear Sir or Madam:
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Tracey Cofield Name of Person RK 3 S Contracting LLC Firm/Company
110 Brown Rd Address
City/State and Zip Code
Ficky. (ofield 536) gmail. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Richard Cofield at (80) 777-6288 Name of Person Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amount:
□ \$25 Filing Fee

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

Pursuant to the provisions of sections 605.0114 or 605.0116. 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. Name of the limited liability company: RK35 LL	C
2. (a) 110 Brown Rd McDavid F1 325	
Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
Date of filing/registration in Florida 4.	L1900001948
3. Date of filing/registration in Florida 4. 5. (a) Registered Agent and Registered Office shown on the records of the Florida	5 LIC
Registered Agent and Registered Office Shown on the records of the Frontal Registered Office Address (MUST BE FLORIDA STREET ADDRESS	F-132568 = 5
	Rd 8
(b) <u> Cacu Of eld NEW Registered Office ad</u>	dress:
NEW Registered Office Address:	
FI.	
	Constitution by the formed that the
If the limited liability company is not organized under the laws of the the change or changes are made, the Florida street address of the regis agent will be identical. Or, in the case of a Florida limited liability cowas/were authorized by an affirmative vote of the members of the limited articles of organization or the operating agreement of the limited liability of the liabil	stered office and the business office of the registered ompany, it is hereby confirmed that the change(s) nited liability company or as otherwise provided in liability company.
Signature of a member or authorized representative of a member	Printed or typed name of signee
I hereby accept the appointment as registered agent and agree to acceptions of all statutes relative to the proper and complete perform the obligations of my position as registered agent as provided for in to merely reflect a change in the registered office address, I hereby conotified in writing of this change.	t in this capacity. I further agree to comply with the ance of my duties, and I am familiar with and accept Chapter 605. F.S. Or, if this document is being filed onfirm that the limited liability company has been
Signature of Registered Agent	•

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00