P02000111578

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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C. Coulliette AUG 0 6 2007

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Face KI, Ine d/b/A Success Motivators, Ine
DOCUMENT NUMBER: PO2080111578
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:
Barrington G. Wright (Name of Contact Person)
Fack [Inc (Firm/Company)
(Firm/Company)
1850 S.W. S.L. Herrace (Address)
Plantation, FL 33317. (City/State and Zip Code)
For further information concerning this matter, please call:
Barrington 6. Wright at (954) 916-6209 (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Department of State.

Street Address: Amendment Section Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Mailing Address:
Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

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 statement of change is submitted for a corporation organized under the laws of the State of	
1. The name of the corporation: Fack Inc	
2. The principal office address: 1850 S.W. 51 terrace Plantation, FC 33317	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 10/16/2002 Document number: Po 200011	\ 578
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:	
Barrington 6. Wright 1850 S.W. 51 Herrare Plantation, FL 33317	O7 JUL 30 / SECRETARY I TALLAHASSEE
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Barring fon B. Whight 800 East Browned Blud 10hp (P.O. Box NOT acceptable) Ff. Lawy, FC 33301	AM 9: 06 OF STATE E, FLORIDA
The street address of its registered office and the street address of the business office of its registered as changed will be identical.	ed agent,
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. (Signature of a officer of director) Linearly accept the appointment as registered agent and agree to act in this capacity.	
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 per of my duties, and I am familiar with and accept the obligation of my position as registered agent. I document is being filed merely to reflect a change in the registered office address, I hereby confirm corporation has been notified in writing of this change. (Signature of Projected Agent) (Date) If signing on behalf of an entity:	formance Or, if this that the
(Typed or Printed Name)	

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

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