2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000023102

Entity Name: MRMK ENTERPRISES, INC.

FILED Oct 08, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1015 ALHAMBRA WAY SOUTH 9714 NW 6TH PL

ST. PETERSBURG, FL 33705 GAINESVILLE, FL 33206

Current Mailing Address: New Mailing Address:

1015 ALHAMBRA WAY SOUTH 9714 NW 6TH PL

ST. PETERSBURG, FL 33705 GAINESVILLE, FL 33206

FEI Number: 20-2022256 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BARTON, KELLY
1015 ALHAMBRA WAY SOUTH
BARTON, KELLY
9714 NW 6TH PL

ST. PETERSBURG, FL 33705 US GAINESVILLE, FL 33206 US

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.

SIGNATURE: KELLY BARTON 10/08/2008

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 BARTON, KELLY
 Name:
 BARTON, KELLY

 Address:
 1015 ALHAMBRA WAY SOUTH
 Address:
 9714 NW 6TH PL

 City-St-Zip:
 ST. PETERSBURG, FL 33705
 City-St-Zip:
 GAINESVILLE, FL 33206

 Name:
 BROWN, JOSEPH
 Name:
 BARTON, TIM S

 Address:
 1015 ALHAMBRA WAY SOUTH
 Address:
 820 19TH ST SO

City-St-Zip: ST. PETERSBURG, FL 33705 City-St-Zip: ST. PETERSBURG, FL 33712

Title: VP () Delete Title: VP (X) Change () Addition

Name: BARTON, TIM Name: BARTON, TIMOTHY J

 Address:
 1015 ALHAMBRA WAY SOUTH
 Address:
 820 19TH ST SO

 City-St-Zip:
 ST. PETERSBURG, FL 33705
 City-St-Zip:
 ST. PETERSBURG, FL 33712

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KELLY BARTON P 10/08/2008