P03000068818

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	·
(City	//State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nan	ne)
(Doc	cument Number)	
ertified Coples	Certificates	s of Status
Special Instructions to F	Filing Officer:	
		
	Office Use On	ly



300025122803

12/03/03--01031--019 **35.00

O3 DEC -3 AMII: 30

Bosoo was

TRANSMITTAL LETTER

1 1.511

Division of Corporations				
SUBJECT: Porkmeisters Inc. (Name of corporation)				
DOCUMENT NUMBER: P0300068818				
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:				
Robert Rauchmiller (Name of person)				
Porkmeisters, Inc. (Name of firm/company)				
9605 Glenox Lane (Address)				
Riverview, FL 33569 (City/state and zip code)				
For further information concerning this matter, please call:				
Jerrold K. Phillips P.A. at (813) 223-4007 (Name of person) (Area code & daytime telephone number)				
Enclosed is a \$35.00 check made payable to the Department of State.				
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399				

TO:

Amendment Section

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, this statement of	
change is submitted for a corporation organized under the laws of the State of for ida in order	
to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the corporation: Porkmeisters, Inc.	121. 1 8
2. The principal office address: 9605 Glenox Lane	وساء مام
-Riverview FL 33569	2 4
3. The mailing address (if different):	;
The second state of the second	
4. Date of incorporation/qualification: 6/20/03 Document number: P03000068818	
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:	
Marie Jorczak Po 8	
	[
Miami, FL 33173 SAR & F	J .
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	
Robert Rauchmiller &	t max
9605 Glenox Lane (P.O. Box or personal mai/box NOT acceptable)	-
<u> </u>	
RIVERVION, FL 33569	
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.	
K. K. Rauchundle A Robert F. Rauchmiller (Printed ortyped name and little) Director	
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.	•
(Signature of Registered Agent) 11/30/03	•••
If signing on behalf of an entity:	
(Typed or Printed Name) (Capacity)	钱 生态

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