P0400003833/

(Re	questor's Name)	
2404 H	dell Concepts Hollywood Boule Cood, FL 33020	vard
(Cit	ty/State/Zip/Phone) #)
PICK-UP	☐ WAIT	MAIL MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



000184519550

08/23/10--01014--002 **35.00



RA Champ 8/26/10

COVER LETTER

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

CR2FA45 (8 05)



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 Florida
in order to change its registered office ar registered agent, or both, in the State of Florida
1. The name of the corporation GKO Concepts Inc. C New 2 The principal office address: 2404 [to]) wood Rivel address
2 The principal office address: 4 40 LF 170111 Wood BIVILL
3 The mailing address (if different)
SAMO
4. Date of incorporation/qualification 2421104 Document number: P0400003833/
5. The name and street address of the current registered agent and registered office on file with the
Flonda Department of State (If resigned, enter resigned)
- nice hony of 11
613 H.Siscus OC
1-lackandaly, FC 33009
6 The name and street address of the new registered agent (if changed) and /or registered office
(If changed) Kell V Oe II
2404 Holl I wood Blud
Hollywood, CC 33020
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 puthorized 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
Kelly Dell Pres. Amt
I becefus accept the appaintment 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 complicic performance of my duties, and I am familiar with grad accept the obligation of my systion as registered agent. (Ut, I this document is being filed merely to reflect a change in the registered affice address, I hereby confirm that the corporation has been onlight in writing of this change.
10000 8/18/10
If signing on behalf of an entity Rell \ Qe 1 \
Typed or finited Nurse
* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO. DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2EMS (\$505)