## P04000072546

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## **COVER LETTER**

TO: Amendment Section Division of Corporati	ons		
SUBJECT:	Konar, In	C.	
	Name of Cor	poration	
DOCUMENT NUMBER:	P0400	00072546	
The enclosed Statement of Cl	ange of Registered Office/	Agent and fee are submi	tted for filing.
Please return all corresponder	ice concerning this matter to	o the following:	
	Adam F P	lobyak act Person	· .
	Name of Conta	act Person	
	Konar,	Inc.	
	Firm/Con		
	3220 A West B		
	Addre	SS	
	T 51	00000	
	Tampa, Fl. City/State and	Zip Code	
,		_	
E mail a	arobyak@gm ddress: (to be used for fut	nail.com	fication)
L-man at	idiess. (to be ased for ful	are aimaar report nou	neation)
For further information conce	ming this matter, please ca	II:	
Adam F	Robyak	at ( 813 )	748-0433
Name of Cont	act Person	Area Code & Dayt	748-0433 ime Telephone Number
Enclosed is a \$35.00 check m	ade payable to the Departm	ent of State.	
<u>Mail</u> Ame	ing Address:	Street Address Amendment S	<u>:</u> ection
	sion of Corporations	Division of Co	
P.O.	Box 6327	Clifton Buildi	ng
Talla	hassee, FL 32314	2661 Executiv Tallahassee, F	ve Center Circle L 32301

## 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 or registered agent, or both, in the State of Florida.
1. The name of the corporation: Konar, Inc.
2. The principal office address: 3220 A West Barcelona St.
Tampa, Fl. 33629
3. The mailing address (if different):
4. Date of incorporation/qualification: 05/04/2004 Document number: P04000072546
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
Adam F. Robyak
414 The Place Ct. #A16
Tampa, Fl. 33606
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Adam F. Robyak
3220 A West Barcelona St.
P.O. Box NOT acceptable
Tampa, Fl. 33629
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.
Signature of an officer or director  Adam F Robyak / Owner/CEO Printed or typed name and title
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 Date
If signing on behalf of an entity:
Typed or Printed Name

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