## P05000105803

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## **COVER LETTER**

SUBJECT: FRK ENTERPRISES INC (Name of C	Corporation)
DOCUMENT NUMBER: P05000105803	
The enclosed Statement of Change of Registered Offic	e/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter	r to the following:
	K R KIP
(Name of Co	ntact Person)
	ERPRISES INC ompany)
	PALM RD
NAPLES, (City/State a	
For further information concerning this matter, please of	call:
FRANK R KIP	at (239 ) 572-7022 (Area Code & Daytime Telephone Number)
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Depart	tment 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

TO:

Amendment Section Division of Corporations

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this nge is submitted for a corporation organized under the laws of the State of FLORIDA
-	r to change its registered office or registered agent, or both, in the State of Florida.
1. The name of t	the corporation: FRK ENTERPRISES INC
	office address: 298 SABAL PALM RD, NAPLES, FL 34114
3. The mailing a	ddress (if different): SAME
4. Date of incorp	poration/qualification: 07/29/2005 Document number: P05000105803
	street address of the current registered agent and registered office on file with the tment of State:
	FRANK R KIP
	43 BARKLEY CIRCLE SUITE 200
	FORT MYERS, FL 33907
6. The name and (if changed):	FRANK R KIP  43 BARKLEY CIRCLE SUITE 200  FORT MYERS, FL 33907  street address of the new registered agent (if changed) and /or registered office  FRANK R KIP
	FRANK R KIP
	298 SABAL PALM RD
	(P.O. Box NOT acceptable)
	NAPLES, FL 34114
The street addre	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change was authorized by the	as authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.
A	FRANK R KIP, PRESIDENT (Printed or typed name and title)
	the appointment as registered agent and agree to act in this capacity. To comply with the provisions of all statutes relative to the proper and complete performance of all am familiar with and accept the obligation of my position as registered agent. Or, if this not filled merely to reflect a change in the registered office address, I hereby confirm that the been notified in writing of this change.
MA	mature of Registered Agent) //12/06
_	half of an entity:
Frank /	yped or Printed Name)
	* * * FILING FEE: \$35.00 * * *

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314